

Department of Health Care Policy and Financing 1570 Grant Street Denver, CO 80203

AGENCY LETTER

AGENCY LETTER NUMBER: HCPF 18 - 007

SUPERSEDES NUMBER:

DATE: 4/13/2018

DIVISION OR OFFICE: HEALTH INFORMATION OFFICE

SUBJECT AREA: HEALTH FIRST COLORADO AND CHILD HEALTH PLAN PLUS

SUBJECT: MEDICAL ASSISTANCE RETURNED MAIL PROCESS

TYPE: I-INFORMATION

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Purpose:

The purpose of this agency letter is to advise eligibility sites of changes to the returned mail process. This will replace the medical assistance process detailed in the "CBMS Returned Mail Process, Version 1.0," released by the Staff Development Center on April 23, 2015.

Background:

Based on findings from a work group of counties and state agencies, on April 23, 2015, the following recommendation for processing returned mail from CBMS was provided, and made available through the Staff Development Center.

April 2015 CBMS Returned Mail Process, Version 1.0:

After three pieces of mail have been returned, contact the client via any other means possible to ensure the correct current information is on file prior to making changes to the case (for example, calling the client at the phone number on file) and ensuring detailed case comments are entered indicating the steps that were taken and what actions were taken on the case.

Counties have provided feedback that this process is unmanageable with the quantity of returned mail received. For that reason, on February 9, 2017, a new work group of counties, and the Colorado Departments of Human Services and Health Care Policy and Financing, was established to address the workload issues counties face regarding

returned mail. In addition, the Department has reviewed federal guidance to identify flexibility for minimizing the workload associated to return mail.

Information/Procedure:

Beginning immediately, eligibility sites must adopt procedures in accordance with the following requirements.

The returned mail process has been revised for action to be taken on a case after the first piece of returned mail. This supersedes the previous process of waiting for three pieces of mail before action is taken. Cases must be updated to insure members receive important documentation without delays (verifications checklists, redeterminations, etc.).

Following are specific return mail scenarios and actions to be taken with each scenario:

- 1) Returned mail that is un-forwardable (post office sticker indicating no forwarding address, no post office sticker, or return to sender sticker):
 - a) Attempt to reach the member receiving Medical Assistance through the contact method(s) provided by the member.
 - i) If you reach the member, update the case with a new address.
 - ii) If you are unable to reach the member, update the whereabouts unknown field to yes and enter the effective begin date.
 - (1) Per current system logic, this will close the case.
 - b) Retain the envelope (according to the eligibility site's established business process for file retention) indicating no forwarding address, and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.
 - c) If the whereabouts of the member become known while the member is still eligible for services, the case must be reopened (per current best practice). Otherwise a new application is required.
 - d) Record all actions taken within case comments.

Supporting Authority: 42 C.F.R. §§ 435.914(b)(3), 435.916(d), 431.213(d), 431.231(d), 431.17(b)(1)(v).

2) Returned mail with in-state forwarding address:

- a) Update the case with the new address.
- b) Retain the envelope (according to eligibility site's established business process for file retention) indicating the forwarding address and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.
- c) If applicable, send the returned piece of mail to the new address.
- d) Record the change in case comments.

3) Returned mail with out-of-state forwarding address:

- a) Attempt to reach the member receiving Medical Assistance through the contact method provided by the member.
 - i) If you can reach the member, update the case appropriately with the new address.
 - (1) The current residency of the member must also be verified. An individual may have an out of state address but be considered a Colorado resident if they intend to return to Colorado.
 - (a) If an individual is no longer a Colorado resident, update the residency status. The address and residency change will close the case per current system logic.
 - (b) If an individual indicates they intend to return to Colorado, they will meet the Colorado residency requirement and may remain eligible regardless of the out of state address.
 - ii) If you are unable to reach the member, document the means you took to contact the member, including the date and time, and update the case appropriately with the new address.
 - (1) The returned mail and failure to contact the member will be considered as whereabouts unknown for the member. Update the whereabouts unknown field to yes and enter the effective begin date.
 - (a) Per current system logic, this will close the case.
- b) Retain the envelope (according to eligibility site's established business process for file retention) indicating the forwarding address and enough of the document to correctly identify the case, date sent, and document sent. This will be used for auditing purposes.
- c) Record all actions taken within case comments.

Supporting Authority: 42 C.F.R. §§ 435.916(d), 431.17(b)(1)(v), §435.403(a).

Effective Date:

Immediately

Contact:

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