2014 Annual Medicaid Conference Division of Welfare and Supportive Services (DWSS)

# MEDICAID



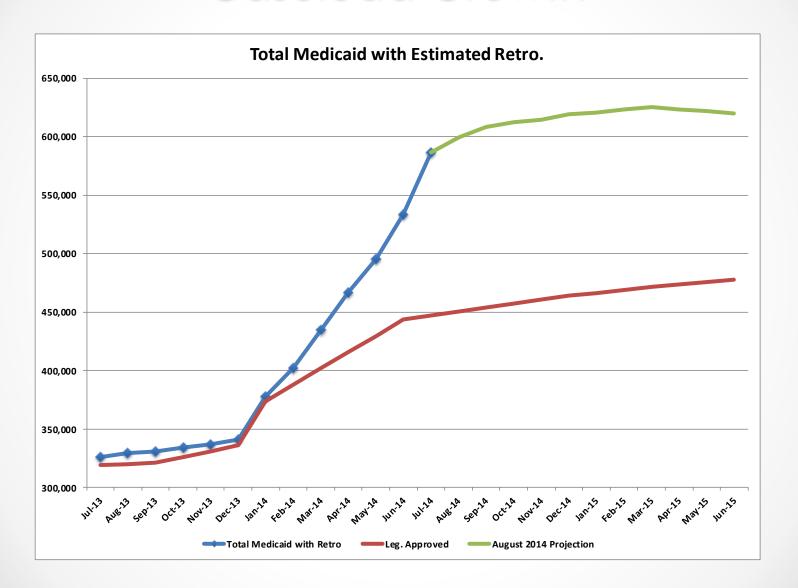
# Division of Welfare and Supportive Services

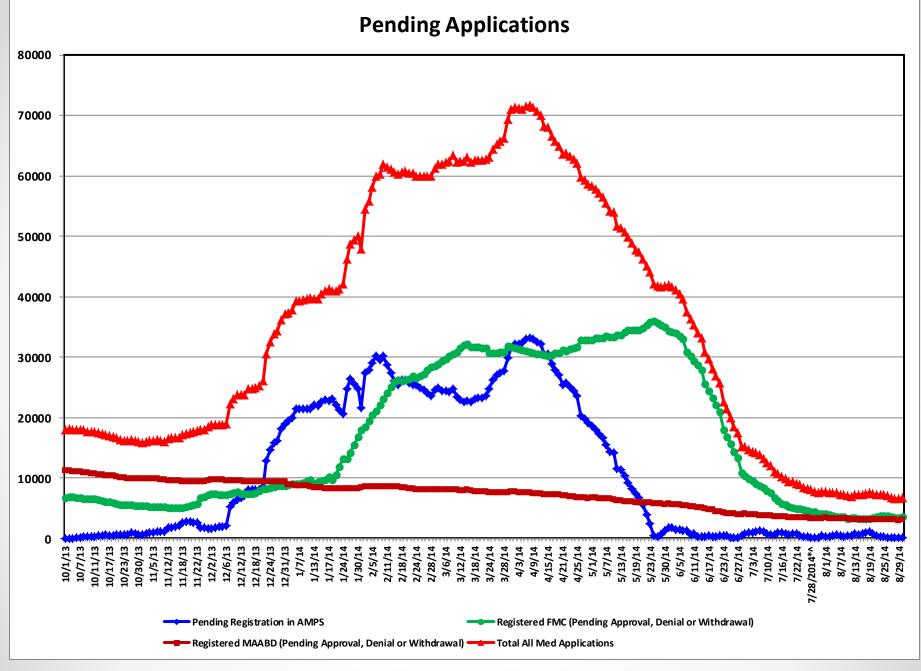
The mission of the Division of Welfare and Supportive Services is to provide quality, timely and temporary services enabling Nevada families, the disabled, and elderly to achieve their highest levels of self-sufficiency.

# Agenda

- Caseload and application processing
- Improving quality and timeliness
- 2015 Open enrollment
  - Reminder there's no open enrollment period for Medicaid
- Presumptive Eligibility

#### Caseload Growth





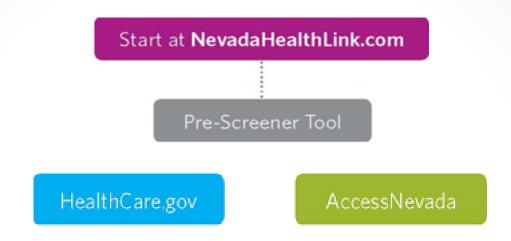
#### **Pending Applications**

		Registered FMC (Pe	nding Approval, Den	nial or Withdrawal)	Registered MAAB	D (Pending App	oroval, Denial c	or Withdrawal)	
DATE	Pending Registration in AMPS	Pending <= 45 Days	Pending > 45 Days	Total Applications	Pending <= 45 Days	Pending 46-90 Days	Pending > 90 Days	Total Applications	Total All Med Applications
Oct-13	442	5,115	1,067	6,181	2,723	1,409	6,340	10,472	17,094
Nov-13		4,578	,	5,564	1,847	1,272	,	9,571	16,942
Dec-13		6,427	1,374	7,801	1,767	1,037		9,500	
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Jan-14	22,349			11,191	1,820	839	·	8,447	41,987
Feb-14	26,738		8,550	24,649	2,205	1,209		8,397	
Mar-14	24,662	15,219	15,620	30,839	1,974	1,381	4,479	7,834	63,335
Apr-14	28,208	8,598	22,640	31,239	1,506	1,547	4,166	7,219	66,666
May-14	9,246	7,587	26,702	34,289	1,104	1,121	3,941	6,167	49,702
Jun-14	680	6,605	18,224	24,829	946	698	3,195	4,838	30,347
Jul-14	690	3,449	3,012	6,461	1,096	344	2,169	3,609	10,760
Aug-14	487	2,772	788	3,560	1,139	315	1,724	3,177	7,224
Sep-14	118	2,830	655	3,485	1,060	314	1,426	2,800	6,403

# Improving Quality and Timeliness

- Business Process Improvements
- Enhanced Lobby Management
- Document Imaging
- Client Correspondence Management
- Increased Staffing
- Expanded Call Center

# 2015 Open Enrollment



- Clients who choose to use the pre-screener and are determined potentially eligible for a Qualified Health Plan (QHP) will be directed to apply using HealthCare.gov
- Clients who choose to use the pre-screener and are determined potentially eligible for Medicaid will be directed to apply using Access Nevada.
- Clients who need to make a change to their 2014
  QHP will be directed to the Silver State Health
  Insurance Exchange System.

# Presumptive Eligibility

- First Step
  - Contact DHCFP, Provider Enrollment Unit
    - (877) 638-3472
    - Requires an amendment to your current contract to include Presumptive Eligibility
- Qualified Entity
  - Hospital (Provider type 11)
  - Critical Access Hospital (Provider type 75)
- Qualified Employees
  - Academy certified
  - o FBI background check

### Presumptive Eligibility Cont.

#### Requirements

- Only one presumptive period allowed within 2 calendar years
- Entity must assist 90% of presumptively eligible persons submit formal application for Medicaid
- State requires 94% accuracy rate on presumptive determinations
- Must notify DWSS of determination within 5 days
- Entity cannot use Third Party Contractors for eligibility determinations

#### Eligibility

- Begins the day the presumptive eligibility determination is made
- From date of eligibility determination through end of next month