



KanCare Update

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Agenda

- Eligibility Criteria
- Electronic Matching Criteria
- Eligibility Hierarchy and Document Requirements
- Eligibility Verification Timelines

Eligibility Criteria

- Applicant for Medicaid must meet both financial requirements for program as well meet a category of eligibility. Categories include:
 - Child.
 - Pregnant Woman.
 - Caretaker Adult.
 - Disabled per SSA requirements.
 - Elderly.
- Kansas is required to follow CMS rules and regulations when processing eligibility.
 - If state is determined non-compliant with CMS requirements then federal dollars are at risk.

Eligibility Criteria

- Applicant could meet financial requirements but if they do not fit into a category, they are not eligible for Medicaid.
- To be eligible for Medicaid a member must:
 - Meet financial requirements.
 - Meet category requirement.
 - Be a resident of Kansas.
 - Meet citizenship requirements and verify those requirements.
 - Either via electronic match or submission of documents verify earned and unearned income.
 - Demonstrate resources are within acceptable limits.
 - For HCBS and some institutional settings, members must also meet functional eligibility criteria.
 - Reside in an appropriate setting (such as nursing facility, assisted living facility, or in the community).
- Medicaid enrollment in Kansas is on average over 60% children under age of 19.

Electronic Matches

- The Affordable Care Act implemented the use of electronic data sources with trusted third-party sources to verify information.
- CMS requires that electronic matches be done whenever possible to reduce burden to consumer and decrease processing timelines.
- If electronic matches can complete requirements for eligibility determination, the system will automatically determine if eligibility criteria is met or not.
- If electronic matching is not allowed or results do not meet federal requirements, then documents are required from consumer. Some electronic match information still requires validation by individual (i.e. residency match commonly referred to as PARIS report).
- If paper documents are required and applicant does not submit an allowable verification document eligibility will be denied.

Documentation Requirements

- Documentation is required only for the items that cannot be verified electronically.
- Paper documents are uploaded in system and attached to the case for permanent record.
- Eligibility worker enters information from acceptable documents into eligibility system.
- Eligibility system will take all information and determine if eligibility criteria is met. If any required field is not verified and completed system will not generate eligibility decision.
- System maintains a record of all individuals accessing cases in event research is needed or concerns with a case are raised.

Eligibility Hierarchy

- Electronic Data Sources are part of the Tiered Verification policy.
- State of Kansas pays for most electronic matches
- The tiers are designed to verify reported information to the fullest extent possible before contacting the applicant/recipient for paper verification.
- A hierarchical relationship exists among the tiers meaning that Tier 1 is used first. If Tier 1 is not available, then use Tier 2 and so on.

Tier 1: Payer Interfaces – (Data comes directly from the source and are considered highly accurate)

- Example (Federal Hub, KDOL Unemployment, SSA, KPERS)

Tier 2: Automatic Interface – (Interfaces that do not come directly from the source of information.)

- Sources can be checked automatically by KEES or manually by eligibility workers
- Example (KDOL earned income, TALX (Equifax), EVVE, KSWebIZ, AVS)

Eligibility Hierarchy

Tier 3: Research – Manual review of all other information available to the agency or collateral contacts.

- Example (Reviewing the Medical and Non-Medical case file or the agency contacts the employer, business, or agency.)

Tier 4: Request for Information – (Agency sends a written or verbal request for information with the applicant/recipient.)

- This is used only when attempts to verify information through Tiers 1 – 3 have been unsuccessful.
- Acceptable Tier 4 verification can include: Tax Returns, Bank Statements, Life Insurance Policies, Trusts/Annuity contracts, Proof of Earned/Unearned Income (if not verified in Tiers 1-3), etc.
- For earned income: Most recent 30 days of paystubs or an employer written statement (wages), a tax return or self-employment worksheet (self-employment only) – However, If provided with the application or review would be considered Tier 1.

Eligibility Verification Timeline

- Continuous eligibility (CE) requirements apply to children under age 19, pregnant women, and adult caretakers.
 - CE is where a state provides 12 months of continuous coverage after initial eligibility is approved.
 - Eligibility is reverified at the end of the 12 months to determine if eligibility criteria is still met.
 - Providing CE to children is required by federal law.
 - Kansas extended post-partum coverage up to 12 months in 2022.
 - Adult caretakers were added to CE coverage in 2012 due to concerns with “churn”.
- All other adults are not subject to CE requirements and negative action can be taken on a broader basis
 - This group is primarily disabled adults and individuals in nursing facilities or receiving HCBS services so there is not much change in income or other life circumstances that would impact eligibility.

Eligibility Verification Timeline

- During Public Health Emergency Kansas did not stop running renewals.
 - Renewals were run monthly
 - Any Medicaid member who could be approved via electronic matches was granted a new 12-months of eligibility
 - Any Medicaid member who could not be approved via electronic matches had their eligibility moved forward four months since state could not end eligibility except in very limited circumstances. Each extension of the PHE resulted in these cases moving another four months
- When PHE ended, the first four months of Unwinding was heavily weighted to Medicaid members that could not be electronically verify during the PHE
 - Allowed Kansas to work these cases first to determine if these members still met eligibility requirements

Eligibility Quality Control

- If after eligibility is granted and subsequently it is determined the individual is found to not have been initially eligible due to agency error or fraud, eligibility is ended (timely notice is required).
 - This provision also applies to populations under Continuous Eligibility requirements.
- Federal requirements around quality control to ensure accuracy of eligibility decisions.
 - 2022 federal audit (referred to as PERM) Kansas had an error rate of 6.82%. Previous error rate from 2019 audit was over 27% with vast majority of errors attributed to well-documented issues with the KanCare Clearinghouse in 2016 – 2018.
- Additional quality control requirements have been added at both federal and state level.
 - States are required to conduct PERM-like audits continually and submit results and mitigations to CMS. The goal is for the state to move to PERM compliance
 - Kansas moved the quality function in-house to address issues identified in 2019 PERM audit and 2022 results demonstrate success of move.

Eligibility Quality Control (cont)

- Increased audits of system functionality to identify any systems issues early to address timely:
 - Example: In 2019, KDHE identified eligibility system gap that allowed TransMed eligibles to remain enrolled past 12-month window:
 - Eligibility system vendor created a fix to address the issue, but fix was delayed due to start of the PHE and new CMS direction on member disenrollment.
 - As soon as PHE ended in Spring 2023 the fix was implemented.
 - Information about system issue and delay of fix implementation was contained in 2023 Inspector General report.
 - Example: In 2021 as a result of an Inspector General audit a system issue was identified that was preventing eligibility end dates for some deceased individuals to not be sent to KMMS and the MCOs.
 - Fix was implemented and no subsequent issues have been identified.
- Tracking of issues raised by providers, stakeholders or members to identify any work related accuracy so issues be rectified.
- Coordinate with Inspector General so errors can be mitigated quickly.

Questions



Appendix

Current Electronic Verifications Used

- **VLP (Verify Lawful Presence):** Verifies Non-Citizenship Status to determine “qualified non-citizenship status is met”.
- **TBQ:** Sole source of Medicare Part A, B, and D entitlement (including B-ID).
- **Social Security Interfaces (SDX, SVES, BENDEX):**
 - SSN Verification, Medical Conditions, SSA/SSI Income.
- **Federal Hub:**
 - SSN, DOB, Citizenship/ID.
- **KPERS (Kansas Public Employees Retirement System):** Verifies KPERS payments.
- **KDOL (BASI):** Verifies earned income with Kansas Dept. of Labor (KDOL) and Reasonable Compatibility.
- **TALX (Equifax):** Verifies earned income through TALX (Equifax) and Reasonable Compatibility.

Current Electronic Verifications Used

- **KDOL/UI:** Verifies unemployment income.
- **AVS:** Asset Verification System – Used to verify liquid resources for E&D/LTC Programs.
- **PARIS:** Verifies if recipients receive public assistance in two or more states. Also verifies Veterans benefits.
- **APPRISS:** Verifies incarceration begin/end dates for city and county jails in Kansas.
- **EVVE (Electronic Verification of Vital Events):** Provides access to Kansas birth records.
- **KWebIZ:** Is a statewide database that includes immunization records. Used to verify identity for (only) children.
- **NCOA (National Change of Address database):** Verifies permanent address changes maintained by the U.S. Postal Service.

4. Acceptable Verifications (Tier 4)

Income Type	Examples of Acceptable Documentation
Annuities	Annuity contract, ES-3167 & ES-3167a forms. If unable to sell, obtain 3 letters from reliable sources showing the annuity cannot be sold or the income stream from it cannot be received by someone other than the designated beneficiary.
Trusts	<p>A complete copy of the trust including all schedules & Answers to the following:</p> <ul style="list-style-type: none"> • A complete copy of the trust including all schedules. • The name, address and phone number of the current trustee and, if someone other than yourself, how they are related to you? • What was the source of funding for the trust? If funded by a third party, how are they related to the member? If derived from a will, how was the testator related to you and when did they die? • Provide a complete list of assets held by the trust & the approximate value of each. Normally the Schedule A lists these assets and must be provided. If the Schedule A is not current, provide the value of assets still held by the trust as well as any new assets owned by the trust. If assets are no longer owned by the trust, explain what happened to the assets. • Have assets held in the trust been sold or transferred in the last five years? If yes, when and for how much? • Are payments being received from the trust? If yes, provide proof of each payment received in the last year, the date on which it was received, and the amount of each payment. • Provide any other information you want us to consider regarding the trust. • If this is an ARCare Trust please provide the joinder agreement.
Child Support	Child Support Order or Divorce Decree showing required payments
Spousal Support	Spousal Support Order or Divorce Decree showing required payments
Voluntary Payments	Letter from Absent Parent indicating payment dates and amounts
Workers' Compensation	Letter from Company making the payments
Disability Income	Letter from Company making the payments
Wages, Bonus, Commission, Tips, Overtime	Paystubs, Employer Statement
Recurring Insurance Payments	Letter from insurance company paying recurring payments
Dividends or Interest	Bank statement showing monthly dividend, letter from Financial Institutions, 1033-DIV
Military Allotments	Benefit Letter
Lottery/Gambling Winnings	1040 Personal Tax Return
Native American payments from leases or trusts of individually or tribal owned land	Document from Tribe
Native American Tribal Disbursements (includes casino)	Document from Tribe
KPERS	Benefit Letter
Pension/Other Retirement	Pension letter from company paying the pension, 1099 form
Out of State Unemployment	Benefit Letter
Veterans (Work Therapy, Housing Allowance, A&A, Disability, Pension)	VA Benefit letter, letter on VA letterhead, IM-3121
Railroad Income	Benefit Letter, letter on Railroad letterhead
Self-Employment	Most recent tax returns with all schedules and attachments, KC5150 if taxes have not been filed or they report a significant change.
Other Income	Benefit letter or other proof of gross monthly income

4. Acceptable Verifications (Tier 4) - Continued

Potential Resource Type	Examples of Acceptable Documentation
VA Benefits	Confirmation email or letter from VA stating they have applied, letter from agency representative or advocate that has helped consumer apply for VA benefits

Transferred Property / Income Type	Examples of Acceptable Documentation
Sale of a Resource	Bill of Sale, Bank Statements, Proof of how funds were spent

Resource Type	Examples of Acceptable Documentation
Annuity	Annuity contract, ES-3167 and ES 3167A forms. If unable to sell- 3 letters from reliable sources showing the annuity cannot be sold or the income stream from it cannot be received by someone other than the designated beneficiary.
Trust	Complete Copy of Trust including Schedule A and list of assets included in the trust. Any pertinent information supporting the establishment, funding mechanism, or current value must be obtained
Bank Accounts/Cash/Direct Express	Account Statements, Direct Express Card Balance Slip, Letter from
Bank Account-Care Home Resident Account	Statement from Administrator of the care account
Burial Funds	Burial Plan with detailed list of goods/services. If the burial plan is irrevocable, provide verification of its irrevocability
Reverse Mortgage	Reverse Mortgage Statement
IRA/Keough/MyRA	Current Statement
Bonds	Copy of the bond
Life Insurance	We do not need a copy of the policy. We need a statement from the life insurance company which includes: 1) the policy number(s) of each policy owned; 2) the face value of each; 3) if each is term or whole life; 4) the current cash value of each policy; and 5) the person and phone number to contact if we have questions.
Pension Plans/Funds	Current Statement
Buildings/Land	County Tax Evaluation Statement, Appraisal Document
Buildings/Land that are for sale	Photo of "For Sale" sign on property, copy of ads in newspaper with sale price consistent with fair market value, current listing with real estate company
Motor Vehicle that is for sale	Ad in newspaper, local shopper with price consistent with fair market value, Photo of "For Sale" sign with phone number on vehicle
Motor Vehicle	Document from Insurance showing current value of the vehicle. (If vehicle is over 7 years old, it is valued automatically at \$100)