

ILLINOIS DEPARTMENT ON AGING (IDoA)
DIVISION OF HOME AND COMMUNITY SERVICES

Title: Illinois Volunteer Money Management Program (IVMMP) Demonstration Project Eligibility and Managed Care Organizations Program (Revised)	CREATED: By: J. Jimenez	
	ELECTRONIC FILE NAME: IVMMP.MCO policy 01.01.18	
	EFFECTIVE DATE: January 1, 2018	
OPERATIONS POLICY: IDoA will implement policy and procedure for eligibility for IVMMP.	Last Revisions: May 20, 2013	By: S. Alexander
	Approved By: J. Jimenez	Date: 01.01.18
Search Word(s): Money Management Demonstration Project Managed Care Organization MCO Eligibility	Pertains to: <input checked="" type="checkbox"/> CCU For Informational Purposes Only: <input type="checkbox"/> In-Home Service <input type="checkbox"/> Adult Day Service <input type="checkbox"/> Emergency Home Response Service <input checked="" type="checkbox"/> Other: IVMMP provider agencies <input checked="" type="checkbox"/> Other: MCOs	
REQUIREMENT: Each Care Coordination Unit involved in the IVMMP will follow IDoA's policy and procedure for establishing eligibility for the IVMMP demonstration project operated by IDoA.	RULE REFERENCE: OTHER REFERENCE(S):	
	Rescinds Previous IDoA Policy:	
	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> Yes
	Title: Same	Date: 05/20/13

PURPOSE:

The purpose of this policy is to notify Care Coordination Units (CCUs) that participants enrolled in the State of Illinois' Managed Care Organizations (MCOs) will be allowed to continue to receive Illinois Volunteer Money Management Program (IVMMP) services through the Community Care Program (CCP) and the Adult Protective Services (APS) Program while enrolled in the MCO program.

POLICY:

Enrollment in an MCO will not preclude a participant from receiving IVMMP services either through the CCP or the APS program. MCOs will be encouraged to make referrals to the local IVMMP providers. For those IVMMP participants being served under the APS program there will be no change in process nor will there be any interruption of services. For those IVMMP participants being served under CCP

there will be a slight procedure change (see below) but there should not be any interruption of services.

PROCEDURE:

The following procedures will be utilized by Care Coordinators regarding MCO participants and their eligibility for IVMMMP.

- 1) Upon new referrals for Money Management services, Care Coordinators are required to verify the participant's Medicaid status in the Participant Search Screen system, located at <https://secure1.illinois.gov/AGE/ParticipantSearch/> to determine if they are enrolled in an MCO. If a participant is enrolled in the MCO and receiving waiver services through the MCO, they can still receive Money Management services through CCP or APS (whichever is applicable). Referrals can be accepted from the MCO case managers or directly from the participant. If the referral comes from any other source besides the MCO case manager, the IVMMMP case manager should communicate to the MCO case manager the outcome of the IVMMMP assessment. Communication between the IVMMMP case managers and the CCU or MCO case managers is essential.
- 2) Current APS participants will continue to receive IVMMMP services without any interruption in services and billing for services through the APS program will not require any changes. New APS referrals will continue to be assessed and billed as normal.
- 3) If a current CCP IVMMMP participant becomes eligible for enrollment in an MCO, the CCU will be required to reauthorize services so the IVMMMP provider agency can receive reimbursement for services from IDoA. The CCUs will be required to terminate the current IVMMMP services in CCP (Program type 11) and authorize the IVMMMP services under the MCO program (Program type 15) in the services section when they authorize the participant for MCO Home and Community Based services. (See Policy titled: Transferring Current CCP participants to MCOs, procedure #4 & #5, for directions in terminating and authorizing participants enrolling in MCOs.) This will result in both the MCO and the IVMMMP provider being authorized on the transfer Case Authorization Transaction (CAT).
- 4) New MCO referrals: If the MCO identifies that a MCO participant could benefit from money management services, the MCO provider may request the CCU to authorize IVMMMP services through the local IVMMMP provider agency. (See Policy titled: MCO enrollee requiring waiver services.) Once a determination of eligibility is approved, the CCU will authorize the IVMMMP assessment and monthly services under the IVMMMP provider agency contract number through a 10/12 CAT with a bill code of "000" (Program Type 15) and an Eligibility Determination Date (EDD) equal to the date of the IVMMMP approval. IVMMMP providers will bill for services through the eCCPIS system under their IDoA IVMMMP contract number (for CCP IVMMMP participants) and through the APS billing system (for APS IVMMMP participants). IDoA will reimburse the IVMMMP provider agency for services, not the MCO.
- 5) IVMMMP provider agencies are encouraged to continually reach out to the MCOs to promote their service and to ensure that case managers know how to make proper referrals. IVMMMP providers may also want to consider possibly expanding their services to include private pay MCO clients that are not CCP or APS eligible as a way to grow their program.