



Provisional Eligibility

November 1, 2018

Temporary Medical Eligibility vs. Provisional Eligibility

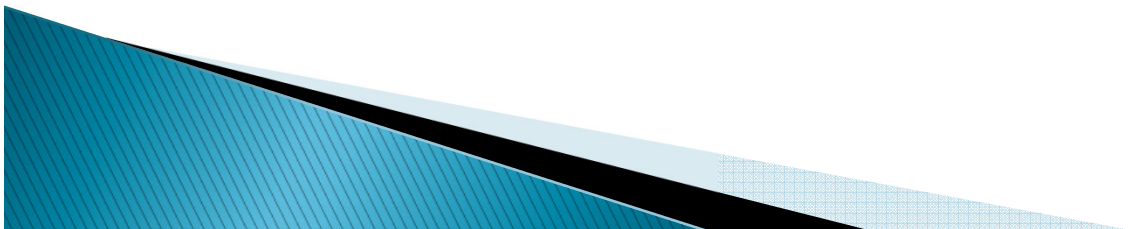
- ▶ Temporary Medical Eligibility and Provisional Eligibility are two separate types of Medical Eligibility.
- ▶ They are the products of separate lawsuits against the State regarding its ability to process eligibility applications timely.
- ▶ Both types of eligibility allow individuals to receive coverage for medical services, but the processes for approval and the services covered are different.

Temporary Medical Eligibility

- ▶ Temporary Medical Eligibility is issued for a person whose medical application pends beyond the legal time limit and the delay is determined to be the State's delay.
- ▶ Once the time limit is exceeded, the Department of Human Services automatically sends a letter to the individual instructing them to contact their local DHS office for a medical card if they need medical services.
- ▶ For a person to receive Temporary Medical Eligibility, they must request that the benefits be issued.

Temporary Medical Eligibility – continued

- ▶ Temporary Medical Eligibility does not include coverage for Long Term Care (LTC) services.
- ▶ Therefore if a resident obtains coverage through this process, the LTC provider will not be able to bill for LTC services.
- ▶ Temporary Medical Eligibility ends when the individual is either approved or denied for medical benefits.



<Header Information>

Notice of Possible Entitlement to Temporary Medical Assistance

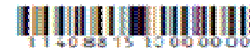
The Department has not made a decision on the application for medical coverage within the legal time limits. Due to the Department's delay, you may request a temporary medical card while your application is still pending a decision. Coverage could begin <Temp Medical Begin Date> for individuals included in the application for medical assistance.

The card may be requested the following ways:

- Manage My Case, if you have an account; or by
- Returning this form to <Local Office Name>; or by
- Mailing the form to P.O. Box 19138, Springfield, IL 62794; or by
- Phone or in person at the office where you applied.

The temporary medical coverage will end when the Department either approves or denies your application.

This coverage does not include Long Term Care Services and Supports (LTSS).

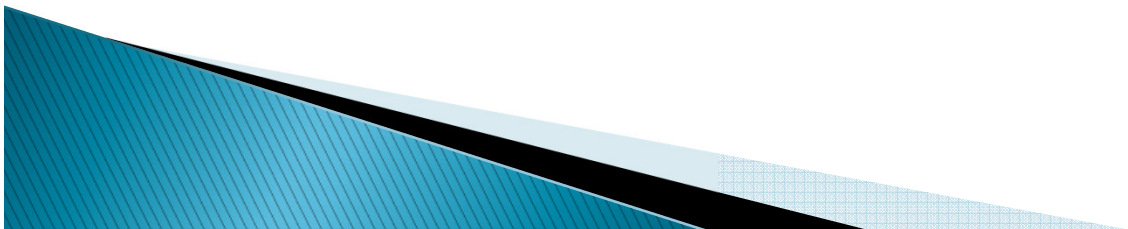


Provisional Eligibility

- ▶ Provisional Eligibility is authorized for a person whose admission transaction to a LTC facility pends over 45 days, and the person has either 1) an active medical case or 2) a pending medical application over 45 days old.
- ▶ Provisional Eligibility is not requested by either the individual or the LTC provider.
- ▶ HFS authorizes Provisional Eligibility when the criteria above is met.

Provisional Eligibility

- ▶ Provisional Eligibility includes coverage of LTC services as well as other Medicaid services.
- ▶ Provisional Eligibility ends when the LTC services are either approved or denied, or the person discharges from the facility.
- ▶ Provisional Eligibility can be authorized for someone who has already been approved for Temporary Medical Eligibility.





State of Illinois
Department of Human Services

Date of Notice: XX/XX/2018

Case Number: Number

Case Name: Name

Name
Address
City, IL Zip

You can manage your case online at
abe.illinois.gov

Esta notificación está disponible en
Español. Usted puede solicitarla por
internet en abe.illinois.gov o llame
al 1-800-843-6154 (TTY 1-800-447-
6404).

Notice of Provisional Eligibility for Long Term Care Services and Supports

Since a decision regarding eligibility for payment for Long Term Care services and supports has not yet been determined by the State, these services have been provisionally approved. This means that the State will pay for Long Term Care Services and Supports incurred beginning XX/XX/2018. Provisional eligibility will end when a decision is made on your eligibility for payment for Long Term Care services and supports. If you are determined eligible, payment will continue. If your eligibility is denied, State payment for Long Term Care Supports and Services will stop. You will receive a notice when a decision on your application has been made.

If you have questions about this notice contact the DHS office handling your application.

Medical Field Operations - Central
1642 W 59th St, FL 1
Chicago, IL 60636
(773)863-6339
(773)863-6307 fax

DHS.MFOCentral@illinois.gov

Admission TAN Status Codes

- ▶ On October 18, 2018, the Department of Healthcare and Family Services (HFS) began posting a list of admission Transaction Audit Numbers (TANs) in Julian date order on the HFS website.
- ▶ They are listed in pdf format by year (2015 – 2018) and located on the Long Term Care Changes page.
- ▶ The lists will be updated weekly and provide the current status of the submitted admission transactions.

Admission TAN Status Codes – continued

| Status Code | Description |
|-------------|--|
| 00 | Pending - Initial Status of the Transaction - Not Reviewed |
| 01 | Pending - Penalty Period |
| 02 | Pending - Resource Spend Down |
| 03 | Pending - 30 Day Extension Requested [New – being programmed] |
| 04 | Pending - No Application or Active Case |
| 05 | Pending - Decertified Home |
| 06 | Pending - Income Spend Down [New – being programmed] |
| 07 | Pending - Discrepancy with Discharge Dates from another Facility |
| 08 | Pending - Hold on New Admissions |
| 09 | Pending - VCL Sent Pending Application [New – being programmed] |
| 10 | Rejected - Action Previously Taken or Duplicate Request |
| 11 | Completed - Patient Credit Update |
| 12 | Rejected - By DHS MFO LTC office |
| 13 | Completed - Update made to Admission / admission approved |
| 14 | Pending - Referral to OIG [New – being programmed] |
| 15 | Pending - Admission Systematically Entered with Provisional Eligibility |
| 16 | Rejected - System Assigned by HFS [New – being programmed] |
| 99 | Rejected - System Assigned Due to Entry Errors [Note: Prior to 09/01/18, this status code was applicable to any rejected transaction, regardless of the reason.] |

Admission TAN Status Codes – continued

- ▶ DHS caseworkers should now be rejecting TANs with a status code of 12.
- ▶ Prior to September, status code 99 was used for most rejections, including system generated Rejections.
- ▶ HFS added a column on the TAN status code file that states whether the TAN was accepted for processing or immediately rejected by the system.
- ▶ The Provisional Eligibility process pulls TANs with status codes 00, 03, 04, 05, 06, 07, 08, 09 and 14 that are pending over 45 days.

Admission TAN Status Codes – Website Posting

| Transaction Audit Number | TAN Status Code | Was TAN Accepted for Processing |
|--------------------------|-----------------|---------------------------------|
| 201700308141301 | 13 | Yes |
| 201700308160580 | 13 | Yes |
| 201700308232684 | 99 | No |
| 201700308261910 | 13 | Yes |
| 201700308280746 | 13 | Yes |
| 201700308320062 | 99 | No |
| 201700308321823 | 13 | Yes |
| 201700308331178 | 13 | Yes |
| 201700308350542 | 99 | No |
| 201700308374131 | 13 | Yes |
| 201700308381389 | 13 | Yes |
| 201700308413900 | 12 | Yes |
| 201700308430682 | 99 | Yes |
| 201700308430980 | 99 | Yes |
| 201700308431790 | 13 | Yes |

Admission TAN Status Codes

Questions on Rejected TANs

- ▶ LTC providers with questions regarding “Rejected” status codes should email the appropriate Department of Human Services (DHS) Medical Field Operations (MFO) LTC office that serves the county in which the LTC setting is located.
- ▶ The request must include the name of the LTC facility, a facility contact name, phone number, email and TAN(s). Please enter in the Subject line “*TAN status inquiry*”. In order to ensure efficiency, each inquiry should be limited to one (1) facility and with a list of TANs for that facility.
- ▶ Refer to the [Provider Notice](#) dated 05/10/17 to identify the appropriate DHS MFO office.
 - MFO North (#200): DHS.MFOInfo@illinois.gov
 - MFO Central (#244): DHS.MFOCentral@illinois.gov
 - MFO Downstate (#163): DHS.MaconLTC@illinois.gov

Admission TAN Status Codes

Pending TANs

- ▶ LTC providers with questions regarding why a TAN, which is over 45 days old, still has a pending status code should submit a fax to (217) 557-5061 or email a request to the Bureau of Long Term Care at HFS.LTC@illinois.gov.
- ▶ The request must include the name of the LTC facility, a facility contact name, phone number, email and TAN(s). Please enter in the Subject line “*TAN status inquiry*”.
- ▶ In order to ensure efficiency, each inquiry should be limited to one (1) facility and with a list of TANs for that facility.

Patient Credit

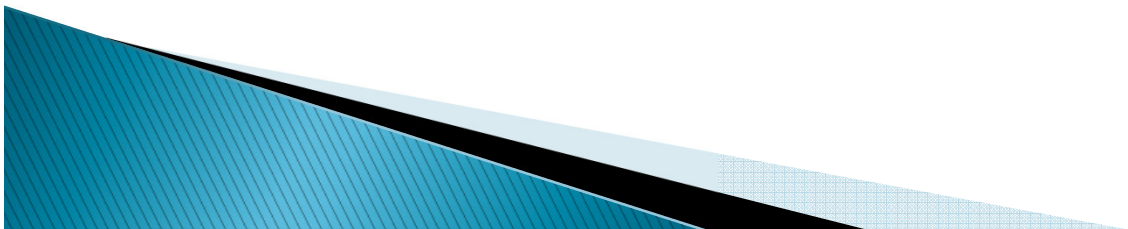
- ▶ HFS is determining patient credit amounts for Provisional Eligibility based on information that is available in the eligibility system at the time of the Provisional Eligibility determination.
- ▶ For individuals with approved Medicaid there is usually income information available to calculate the Patient Credit amount.
- ▶ For individuals with pending medical applications, the income information is usually not available and the patient credit amount will be \$0.

Patient Credit – continued

- ▶ Patient Credit amounts will be updated once the caseworker approves the LTC admission.
- ▶ Patient Credit amounts will be sent to the resident and also entered into the HFS payment system.
- ▶ Paid claims will be adjusted by HFS based upon the updated Patient Credit amounts.
- ▶ Individuals whose coverage is denied will not have their Patient Credit amounts adjusted.

Other Important Information

- ▶ Admission segments that are added to the HFS system will initially be open ended (no discharge date). It is very important for LTC providers to enter discharge dates into MEDI as quickly as possible after the admissions have been entered.



HFS Bureau of Long Term Care Contact Information:

Healthcare and Family Services
Bureau of Long Term Care
Billing Unit
201 South Grand Ave East
Springfield, IL 62763
(217)782-0545
(217)557-5061 fax
(844)528-8444 toll free
HFS.LTC@illinois.gov