DMA ADMINISTRATIVE LETTER NO: 04-11, COMMUNITY ALTERNATIVE PROGRAM (CAP)

DATE: 04/18/2011

SUBJECT: CAP/C-Continued Needs Reviews

DISTRIBUTION: County Directors of Social Services

Medicaid Supervisors Medicaid Eligibility Staff

I. BACKGROUND

The CAP/C Program provides home and community based services to Medicaid recipients under 21 who require institutional care (placement in a nursing facility), but for whom care can be provided cost-effectively and safely in the community. Every 12 Months a Continued Needs Review (CNR) is completed by the CAP/C case manager to determine if the recipient continues to meet CAP/C eligibility for services. If the County DSS does not receive verification of a completed CNR and an approved Plan of Care, the case is terminated for CAP coverage.

II. OVERDUE CONTINUED NEEDS REVIEWS (CNR)

Due to an increase in volume and services, the CAP/C Unit is experiencing a backlog of completed CNRs. Some CNRs are delayed due to transitioning of the review dates from the FL-2 to the date of birth. Additional staff has been hired to assist with the workload.

As of March 30, 2011, the CAP/C Unit is finishing December CNRs and started January CNRs. All CAP/C recipients will have a CNR completed in calendar year 2011. The CNR is due to DMA on the 5th of the recipient's birth month and will become effective the first of the following month. If a recipient has not had a CNR in over 12 months and the 2011 birthday has already occurred, DMA will process it as soon as possible. If the 2011 birthday has not occurred, it is mostly likely not due yet.

III. RESPONSIBILITY OF THE INCOME MAINTENANCE CASEWORKER

Do not terminate CAP/C coverage for cases that have an overdue CNR. Recipients remain eligible for CAP/C based on the most recent approved Plan of Care until their CNR is completed. To verify if the recipient is still eligible under the current Plan of Care, contact the nurse consultant with the DMA CAP Unit at 919-855-4380.

IV. EFFECTIVE DATE

This policy is effective upon receipt.



If you have any questions regarding this material, please contact your Medicaid Program Representative.

Craigan L. Gray, MD, MBA, JD., Director

(This material was researched and written by Ena Lightbourne, Policy Consultant, Medicaid Eligibility Unit)