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| LOCAL COMMISSIONERS MEMORANDUM |
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Transmittal No: 97 LCM-23

Date: March 10, 1997

Division: Office of Medicaid
Management

TO: Local District Commissioners

SUBJECT: Home and Community-Based Services Waiver for Persons with
Traumatic Brain Injuries (HCBS/TBI Waiver): New Recipient
Restriction/Exception Code for Waiver Participants

ATTACHMENTS: There are no attachments to this memorandum.

In 95 LCM-70, we advised you of the need for modifications in the Welfare Management System (WMS) and the Medicaid Management Information System (MMIS) to discretely identify HCBS/TBI Waiver participants, exempt these individuals from co-payments and Medical Assistance utilization thresholds (MUTS), and track their Medical Assistance (MA) expenditures, including expenditures for the waiver services they receive. We indicated that a systems project had been initiated to achieve these objectives and that establishment of a recipient restriction/exception code (R/E Code) was one of the project components.

The systems project has been completed. As a result, a new R/E Code 81 (Traumatic Brain Injury) has been defined and will be accepted by the Recipient Restriction/Exception Subsystem (R/E subsystem) of WMS. The purposes of this memorandum are to explain how R/E Code 81s will be entered into the R/E subsystem for current HCBS/TBI waiver participants and to provide instructions for subsequent entries, deactivations, or terminations of this code by social services districts.

R/E Code 81 Entries for Current HCBS/TBI Waiver Participants

R/E Code 81s for all individuals enrolled in the HCBS/TBI waiver as of March 31, 1997 will be entered into the R/E subsystem by Office of Medicaid Management staff. We estimate that entries will be made for 225-250 individuals enrolled in the waiver between June, 1995 and March 31, 1997.

R/E Code 81 Entries, Deactivations, or Terminations By Social Services Districts

The R/E Code 81 for each individual initially enrolled in the HCBS/TBI Waiver on and after April 1, 1997, must be entered into the R/E subsystem by the social services district with fiscal responsibility at the time of the individual's initial enrollment in the waiver. The district of fiscal responsibility must also update R/E Code 81 for each individual, including those initially enrolled before April 1, 1997, whose participation in the waiver is terminated on or after this date.

Social services districts will continue to be informed of initial authorizations and terminations of participation in the HCBS/TBI Waiver through the Notices of Decision (NODS) found in 95 LCM-70. These decisions are issued by the HCBS/TBI Waiver Management Unit in the Department's Bureau of Standards Development. Since R/E Code 81 is the only appropriate R/E Code for an HCBS/TBI Waiver participant, the NODS do not include the code designation.

Districts should use the following instructions for inputting R/E Code 81 into the R/E subsystem:

1. Accessing the Recipient Restriction/Exception Subsystem
 - a. Access the Medical Assistance Menu by choosing selection 25 on the WMS menu.
 - b. Access the Restriction/Exception subsystem by entering "R" on the Medical Assistance menu.
 - c. Select the "Input" function by entering "I".
 - d. Enter the waiver participant's CIN, Case Number and your worker ID.
 - e. Transmit.
2. Entry of the Recipient Exception Code
 - a. Enter the R/E Code (81) in the RE/EXC TYPE field.
 - b. The RE/EXC FROM DATE is entered equal to the first day the A/R is in "Exception" status.
 - c. Transmit the information and review for accuracy.
 - d. Store the accurate data using (S)F 13.

3. Deactivation of an Erroneous Entry (Removes an incorrect entry)
 - a. Access the RE/EXC subsystem using #1. of these instructions.
 - b. Enter the R/E Code (81) in the RE/EXC TYPE field.
 - c. Enter the RE/EXC PERIOD THRU date equal to the RE/EXC FROM DATE.
 - d. Transmit and review the data.
 - e. Store the accurate data using (S)F 13. (This will completely remove the entry from the input screen. The deactivation transaction will still appear on the Inquiry and Audit screens.)

4. Termination of a Restriction/Exception (This end dates an existing R/E.)
 - a. Access the RE/EXC Subsystem Input screen.
 - b. Enter the RESTRICTION TYPE (81) and the termination date in the THRU DATE field.
 - c. Transmit and review the data.
 - d. Store the accurate data using (S)F 13.

The use of R/E Code 81 will automatically exempt HCBS/TBI Waiver participants from co-payments and MUTS. Therefore, effective April 1, 1997, the interim procedure described in 95 LCM-70 for manually exempting waiver participants from co-payments is cancelled. Also, effective April 1, Threshold Override Applications (TOAs) will no longer be required for waiver participants needing physician/clinic, pharmacy, laboratory, mental health clinic or dental clinic services in excess of the established limits.

Ann Clemency Kohler, Director
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