Medicaid Waiver Management Application (MWMA) Instructor-Led Training
Welcome to the Medicaid Waiver Management Application Training
Introductions

Introduce yourself to the room

• Name
• Agency/County
• Waiver Program You Support
• Role
• Expectations for this training session
Housekeeping

- Bathroom locations
- Smoking location
- Participant materials
  - Hard copies
  - MWMA Training Portal
- Food/Drinks policy for this computer lab
- Breaks
  - Step out of the room when necessary to avoid disrupting the class

Ground Rules

- Please stay “with the class”
  - Work only with your assigned Individual
  - Use the appropriate log in credentials
  - If you finish a task early, help your neighbor
- Respect others and their points of view
- Let facilitators know if you get behind or need clarification
- Silence cell phones, minimize texting, and refrain from checking social media accounts on computer lab equipment
- Do not disconnect any cables or equipment
- Complete online training evaluation
# Course Agenda – Day 1

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<thead>
<tr>
<th>Topic</th>
<th>Minutes</th>
<th>Time</th>
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<td>Welcome – Introductions, Housekeeping and Ground Rules</td>
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<td>8:30 – 8:45</td>
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<tr>
<td>Lesson 1: MWMA Overview</td>
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<td>8:45 – 9:00</td>
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<td>Partner Portal &amp; MWMA Onboarding Overview</td>
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<tr>
<td>Lesson 2: System Navigation</td>
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<td>9:15 – 9:45</td>
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<tr>
<td>Break (15)</td>
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<td>Lesson 3: Waiver Application Intake</td>
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<td>10:00 – 11:00</td>
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<td>Lesson 4: Waiver Application Review</td>
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<td>Lesson 5: Capacity Review and Eligibility Determination</td>
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<td>11:30 – 12:00</td>
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<td>Lesson 6: Performing Assessments</td>
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<td>1:00 – 2:15</td>
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<td>Lesson 7: Waiver Enrollment</td>
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<td>2:15 – 2:45</td>
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<td>Break (15)</td>
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<tr>
<td>Additional and/or Waiver-Specific MWMA Functionality</td>
<td>45</td>
<td>3:00 – 3:45</td>
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<tr>
<td>Questions and Wrap-up</td>
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## Course Agenda – Day 2

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<tr>
<td>Recap of Day 1</td>
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<td>Lesson 8: Case Management</td>
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<td><strong>Break (15)</strong></td>
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<tr>
<td>Lesson 9: Plan of Care</td>
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<td>10:00 – 12:00</td>
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<tr>
<td><strong>LUNCH</strong></td>
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<tr>
<td>Lesson 10: Case Management (continued)</td>
<td>75</td>
<td>1:00 – 2:15</td>
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<tr>
<td><strong>Break (15)</strong></td>
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<tr>
<td>Lesson 10: Case Management (continued)</td>
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<tr>
<td>Lesson 11: Transition to MWMA</td>
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<tr>
<td>Additional and/or Waiver-Specific MWMA Functionality</td>
<td>30</td>
<td>3:45 – 4:15</td>
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<tr>
<td>Wrap-up and Online Evaluation</td>
<td>15</td>
<td>4:15 – 4:30</td>
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</tbody>
</table>
Medicaid Waiver Management Application (MWMA)

Lesson 1: MWMA Overview
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe the features and benefits of the Medicaid Waiver Management Application (MWMA)

• Describe the enhancements provided by MWMA to current business practices

Lesson Time: 15 minutes
What is the Medicaid Waiver Management Application?

- Collaborative effort between the Cabinet for Health and Family Services and the Kentucky Office of the Health Benefit and Health Information Exchange (KOHBHIE)

- Implementation of a web-enabled case management application to support the delivery of home and community-based services under the Medicaid waiver programs

- Two-phased implementation: April 2015 and December 2015
Why is the Commonwealth Implementing MWMA?

Current Waiver Process
- Uses a variety of different databases, paper files, emails and spreadsheets
- Processes are cumbersome, inefficient, and duplicative

New MWMA Application
- Standardizes and streamlines the waiver application process
- Improves care coordination and service delivery to waiver recipients and their families
- Self-service access will help individuals and families make more informed choices
MWMA will be built on the existing KHBE platform which houses kynect, Kentucky's healthcare connection. The application will:

- Standardize and automate essential waiver program processes;
- Provide an integrated, comprehensive view of the individual's services and supports;
- Enable a person-centered approach to service delivery; and
- Integrate with existing Commonwealth systems, providing consistency across technology standards and enabling a Cabinet-wide view of information across Medicaid waiver programs.
What Benefits Does the Medicaid Waiver Management Application Provide?

- Provides automated capabilities around the intake, assessment, eligibility determination, plan of care, case management, incident management, timesheet and reporting functions performed by waiver service providers.

- Provides individuals and families with self-service access to manage their waiver program applications, plan of care, services and timesheets.

- Access to information in real-time.

- Integrates with kynect, Kentucky’s healthcare connection (as of 2\textsuperscript{nd} MWMA release).
What Can You Expect from this MWMA Training?

**Spring 2015**

- Standardized waiver application intake
- Streamlined Level of Care assessment submission and review processes
- Streamlined Plan of Care development, submission and review processes
- Case Management Tools – Case Manager Assignment, Caseload Management, Case Transfers, Program Closures, Case Notes and more
- Automated workflows, tasks and notifications
- Electronic document submission and storage

**Winter 2015**

- Prescreening tools
- Self Service capability for Individuals/Families
- Streamlined application intake across multiple programs (Waiver, SNAP, TANF, Medicaid, etc)
- Improved assessment tools
- Streamlined Medicaid Eligibility and Waiver Enrollment Processes
- Automated waiting list management
- Electronic timesheets for participant directed services
- Streamlined Incident Reporting and Review

Expect to receive training on these topics:

Medicaid Waiver Management Application Instructor-Led Training
Lesson 1: MWMA Overview
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer (QIO)
Reviews submitted application.

Capacity Reviewer (CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor (Assessment Agency)
Completes LOC Assessment.

LOC Reviewer (QIO)
Reviews LOC Assessment and makes determination.

Case Supervisor (Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

Case Manager (Case Management Agency)
Beginning to perform case management activities.

DCBS Caseworker (DCBS)
Enrolls Individual in designated waiver program through KAMES.

Case Manager (Case Management Agency)
Submits Plan of Care.

Plan Reviewer (QIO)
Approves prior authorization and submits the POC as "Current".
Check Your Understanding

What is one benefit that MWMA provides case management agencies?
MWMA Overview Recap

You should now be able to:

• Describe the features and benefits of the Medicaid Waiver Management Application (MWMA)

• Describe the enhancements provided by MWMA to current business practices
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 1*

• **Quick Reference Guides/Job Aids:**
  – Application, Case, and Program Status Quick Reference Guide
  – *Transitioning the Use of the MAP-24 and MAP-24C Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs):** *Medicaid Waiver Management Application Overview* course (3 lessons)
What is the Medicaid Partner Portal Application (MPPA)?

- The Kentucky Medicaid Partner Portal Application is an initiative to streamline and automate the current paper enrollment process using a web-based system under the Commonwealth’s Medicaid Program.

- MPPA replaces the current paper based processes where the Provider Licensing and Certification Branch enroll qualified providers to receive Medicaid reimbursement for services rendered to Medicaid members.
What is the Medicaid Partner Portal Application? (cont’d…)

- Upon completion and approval of their enrollment, users will be able to perform actions such as online screening, enrollment, and maintenance of individual, group, and entity information.

- Additionally, DMS staff will be able to electronically review each enrollment via the Kentucky Medicaid secure Web Portal.

For additional information on MPPA, go to http://chfs.ky.gov/dms/mppa.htm
What Benefits Does MPPA Provide?

• Decreased burden on Providers and reduced DMS Administrative effort through automation of:
  − New provider requests, new provider enrollment, and maintenance processes
  − Sanction checks, certifications/license verifications and individual/business data validations

• Allow providers to review and update information on file with DMS, which will significantly reduce call volume

• Ability to create, submit, and track correspondence between providers and Program Integrity staff

• Reduced rejected applications and decreased cost of postage for providers and the Agency

• Increased reporting ability
Application Onboarding Process Flow

- Create KOG Login
- Access Partner Portal Application
- Check State Plan for Covered Services and Who Can Provide Them
- Meet Requirements to Provide Services
- Check Provider Type Summaries for Enrollment Requirements
- Gather Appropriate Documents for Medicaid Enrollment
- Complete All Fields on The Partner Portal Online Application Tool
- Submit Application Electronically To Department of Medicaid Services

Following the submission of the electronic application: All correspondence will be submitted and received electronically using the Partner Portal Application Tool.
Partner Portal Application Onboarding Overview

The CHFS Public SharePoint Sites uses the Kentucky Online Gateway (KOG) to approve and verify accounts for external users. Anyone who does not have an account in the ds.ky.gov forest will need to create a KOG account.

- To obtain access, you first must complete a one-time registration as a KOG user. Each user must have a unique e-mail address to complete the verification process.
  - **Set Up an Account:** Using a Web browser, such as Internet Explorer, go to https://KOG.chfs.ky.gov/home/default.aspx

- Support for and Assistance with KOG User Accounts
  - **Network Help Desk**
    Monday - Friday, 8 a.m. – 5 p.m. Eastern Time
    502-564-7576
    chfsnetworkhelpdesk@ky.gov
Partner Portal Application Next Steps

• The Kentucky Medicaid Partner Portal will be phased in starting with individual physicians (Provider type 64 and Waiver Providers) during the first quarter of 2015.

• Additional Questions?
  − If you have further questions, please email: Program.Integrity@ky.gov
  − Contact number: 877-838-5085 Mon-Fri: 8:30 AM-4:30 PM EST

*Further instruction involving sign up will be distributed at a later date.*
Medicaid Waiver Management Application (MWMA) Onboarding Overview
MWMA Partner Portal Onboarding Overview

• Internal CHFS staff (Relationship Managers) will invite Agency representatives (Organizational Administrators) to create their accounts via email.
• Organizational Administrators will send invites to additional staff in their agency to create their accounts via e-mail.
• Once you receive the e-mail invite, you will execute the following tasks:
  – Complete your Kentucky Online Gateway profile
  – Answer various security questions
  – Enter user verification information

For detailed instructions on the onboarding process, please review the MWMA On-Boarding Manual Quick Reference Guide/Job Aid.
MWMA Adoption Survey for Case Management Agencies

https://deloittesurvey.deloitte.com/Community/se.ashx?s=3FC11B2656AF1AB2

- Survey sent to POCs three weeks ago
- Survey closes on Friday, 13th March

MWMA Adoption Survey for Case Management Agencies: Part One

Please enter the information for your Organization Administrator below:

The Organizational Administrator is an individual responsible for onboarding MWMA users with their agency onto the Kentucky Online Gateway (KOG) so users have the appropriate credentials to access MWMA and perform necessary tasks.

Once the Organizational Administrator receives an email notification from the DHPB Relationship Manager, the Organizational Administrator will send Kentucky Online Gateway (KOG) invitations to MWMA users within their agency. This is an ongoing role as the Organizational Administrator will be responsible for facilitating the onboarding process for new Case Manager that may join their agency.

Organizational Administrator Name: 
Organizational Administrator Email: 
Organizational Administrator Phone Number: 
Provider Number: 
Name of Case Management Agency: 

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MWMA Training Resources

The following resources provide additional information and instruction:

• Quick Reference Guides/Job Aids:
  – Medicaid Waiver Management Application Onboarding Manual
Medicaid Waiver Management Application (MWMA)

Lesson 2: System Navigation
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe basic navigation in MWMA
• Describe features of the Dashboard screen

Lesson Time: 30 minutes
System Navigation Overview

Users are able to easily navigate MWMA through key links located on the:

1. Top Navigation Bar
2. Left Navigation Bar
3. Center Dashboard
Exploring the Top Navigation Bar

The user can navigate to different areas of MWMA by using the links that display on the top navigation bar located at the top of each screen.
Exploring the Left Navigation Bar

The left menu navigation bar consists of Quick Links which are links to the most common tasks/actions that pertain to the logged-in user.

A Case Supervisor’s Quick Links menu differs from that of a Case Manager’s.

There are three main categories of Quick Links:
1. Message Center
2. Case Management
3. Other Links
Exploring the Center Dashboard: Tasks

The **Select Queue** drop-down menu is located on the top left of the Tasks section. The “My Tasks” queue is always populated with tasks that are only assigned to the logged-in user. The **Select Queue** drop-down menu allows the user to search for tasks that are assigned to their user group.
### Medicaid Waiver Management Application Instructor-Led Training

**Lesson 2: System Navigation**

#### Search Tasks

- <Case Note Type> case note missing for <Note Period>
- Create and Submit Plan of Care for newly assigned individual
- Initiate Annual Recertification
- Lack of Information
- Modify Plan of Care
- Perform Assessment
- Program Closure - View Program Closure
- Record Assessment Results
- Revisions Requested by Case Management Admin
- Revisions Requested by Case Supervisor
- Revisions Requested by Plan Reviewer
- Schedule Reassessment
- Submit Annual Recertification
- Update Objective Status
- Update Service Actual Start Date

#### Search By Individual

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<tr>
<th>Individual ID</th>
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#### Search By Task

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<tr>
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<td>Task Status</td>
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<td>County</td>
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<tr>
<td>Program</td>
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<th>Task Name</th>
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[Submit Button]
Exploring the Center Dashboard: Plans of Care, Appointments, Applications

- **Plans of Care**: Lists Plans of Care initiated but not submitted by the logged-in user.
- **Appointments**: Level of Care Assessment appointments scheduled by the logged-in user.
- **Applications**: Applications for waiver services initiated but not submitted by the logged-in user.
Instructor Demo of MWMA – Basic System Navigation
To follow along the instructor demo of MWMA System Navigation:

1. Use the log in credentials provided by the instructors to log in to the desktop computer

2. Launch web browser
   - Internet Explorer (IE)
   - Firefox
   - Chrome

3. Enter URL for MWMA Training Environment:

4. Log in using the Case Manager log in credentials on your ILT Exercise Data Sheet
Check Your Understanding

True or False:

If a task is late, it is removed from your queue and sent to the Case Supervisor to take action on.
MWMA System Navigation Recap

You should now be able to:

- Describe basic navigation in MWMA
- Describe the features of the Dashboard screen
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual**: *User Guide: kynect Medicaid Waiver Management Application, Lesson 2*

• **Quick Reference Guides/Job Aids**:
  – *System Navigation Quick Reference Guide*
  – *Performing Searches Quick Reference Guide*
Break
Medicaid Waiver Management Application (MWMA)

Lesson 3: MWMA Application Intake
**Application Initiator**
Submits application.

**Application Reviewer**
(QIO)
Reviews submitted application.

**Capacity Reviewer**
(CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

**LOC Assessor**
(Assessment Agency)
Completes LOC Assessment.

**LOC Reviewer**
(QIO)
Reviews LOC Assessment and makes determination.

**Case Supervisor**
(Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

**Case Manager**
(Case Management Agency)
Enrolls Individual in designated waiver program through KAMES.

**Case Manager**
(Case Management Agency)
Submits Plan of Care.

**Plan Reviewer**
(QIO)
Approves prior authorization and submits the POC as “Current”.

**MWMA Lifecycle**

Medicaid Waiver Management Application Instructor-Led Training
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe the waiver application intake process
• Describe the benefits of Medicaid waiver application intake screens
• Complete the MWMA intake screens

Lesson Time: 60 minutes
**Medicaid Waiver Application Intake Overview**

Application Intake serves as the initial phase of the waiver application process.

The Application Intake process is initiated by the Application Initiator, a designated person who enters application details into MWMA on behalf on an Individual.
Medicaid Waiver Application Intake Process

1. **Data Collection**
   - Application Initiator meets with Individual/Authorized Representative/Legal Guardian to complete intake screens

2. **Documentation Upload**
   - If required, supporting documentation is uploaded to the application

3. **Application Submission**
   - Application Initiator submits application

4. **Application Review**
   - Application Reviewer receives a task notification to perform application review
Medicaid Waiver Application Intake Roles

- **Individual**
- **Authorized Representative**
- **Legal Guardian**
- **Application Initiator**
- **Enter documentation and information on behalf of the Individual**

 Medicaid Waiver Management Application (MWMA)
How does the MWMA enhance the waiver application intake process?

- Creates an electronic version of the waiver application that can be accessed by those with the appropriate role/privileges
- Validates data gathered when applicable (e.g., postal address, telephone number, required documentation, etc.)
- Automates the process of indicating what documentation is required based on the information entered for the Individual
- Automates the process of adding required documentation to an application
- Electronically attaches substantiating documents to the waiver application
MWMA Intake Screens

MWMA includes the following nine intake screens used by the Application Initiator:

- Basic Information
- Contact Information
- Representative Information
- Services
- Clinical Information
- Living Situation
- Caregiver Status
- Current Conditions
- Document Upload
“Print Blank Application”
- Paper-based application containing the same questions in the electronic form

“Start a new application”
- Within the Other Links section of “Quick Links”

MWMA Application Intake Exercise
- Use your Participant Data Sheet
- Log in as a Case Manager (TRN4_N_CM_###)
- You have free rein when completing the MWMA application intake screens
Class Exercise-
Initiating and Submitting a Waiver Application

Exercise Time: 40 minutes
Check Your Understanding

True or False:

When the check box next to “Individual has the same mailing address as above” is checked, data in the Physical Address fields are copied over to the Mailing Address fields.
Check Your Understanding

What is one way MWMA enhances the Medicaid waiver application intake process?
Medicaid Waiver Application Intake Recap

You should now be able to:

- Describe the waiver application intake process
- Describe the benefits of the Medicaid waiver application intake process
- Complete the MWMA application intake screens
MWMA Training Resources

The following resources provide additional information and instruction:

- **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 3*

- **Online Courses/Web-based Training (WBTs):** *Initiating an Application for Medicaid Waiver Services* course (6 lessons)
Medicaid Waiver Management Application (MWMA)

Lesson 4: MWMA Application Review
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer (QIO)
Reviews submitted application.

Capacity Reviewer (CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor (Assessment Agency)
Completes LOC Assessment.

LOC Reviewer (QIO)
Reviews LOC Assessment and makes determination.

Case Supervisor (Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

Case Manager (Case Management Agency)
Enrolls Individual in designated waiver program through KAMES.

Case Manager (Case Management Agency)
Submits Plan of Care.

Plan Reviewer (QIO)
Approves prior authorization and submits the POC as “Current”.

MEDICAID Waiver Management Application Instructor-Led Training
Upon completion of this lesson, you will be able to:

• Describe the waiver application review process
• Enter comments during application review
• Determine status of an uploaded document
• Indicate a waiver application’s completion status in MWMA

Lesson Time: 45 minutes
Medicaid Waiver Application Review Overview

Application Review serves as the second half of the waiver application process.

The Application Reviewer (QIO staff) reviews the application details and submitted documents. After completing their review, the Application Reviewer refers the application to the waiver program that best suits the Individual’s needs.
Medicaid Waiver Application Review Process

Application Submission

Application Reviewer receives a task notification to perform application review.

Application Review

Application Initiator submits the application through MWMA.

Application Reviewer receives a task notification to perform application review.

Application Initiator uploads sufficient documentation and resubmits application in MWMA.

Application Resubmission

Application Initiator Notification

Application Initiator uploads sufficient documentation and resubmits application in MWMA.

Application Initiator Notification

Complete Application

Meets waiver targeting criteria. Waiver case active.

Waiver Case Opened

Incomplete Application

Does not meet waiver targeting criteria. Application closed.

Application Closure

Capacity Review and Eligibility Determination
Roles Involved in the Medicaid Waiver Application Review Process

- **Application Initiator**
  - Enters documentation and information on behalf of the Individual

- **Application Reviewer**
  - Reviews information and uploaded documents, enters comments, and refers application to a waiver program

- **Capacity Reviewer**
  - Reviews the application and comments entered by the Application Reviewer
How does the MWMA enhance and streamline the application review process?

- Creates tasks for various roles involved in the review process
- Allows entry of comments during the review process. Comments are viewable by other Application Reviewers as well as the Capacity Reviewer
- Allows the review of supporting documents to occur concurrently with the review of the waiver application
- Keeps an electronic record of the Application Reviewer’s determination whether the documents are sufficient to substantiate the waiver application or not
Instructor Demo

Reviewing, Entering Comments, and Referring a Waiver Application in MWMA

Demo Time: 20 minutes
Check Your Understanding

True or False:

An application with an uploaded document that has been marked by the Application Reviewer as “Invalid” may still be referred to a waiver program.
Check Your Understanding

What is one way MWMA enhances and streamlines the application review process?
Waiver Application Review Recap
You should now be able to:

• Describe the waiver application review process
• Enter comments during application review
• Determine status of an uploaded document
• Indicate a waiver application’s completion status in MWMA
MWMA Training Resources

The following resources provide additional information and instruction:


• **Quick Reference Guides/Job Aids:**
  – *Using Member Match and Individual Summary Screens Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs): Reviewing an Application for Medicaid Waiver Services course (6 lessons)**
LUNCH
Medicaid Waiver Management Application (MWMA)

Lesson 5: Capacity Review and Eligibility Determination
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer
(QIO)
Reviews submitted application.

Capacity Reviewer
(CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor
(Assessment Agency)
Completes LOC Assessment.

LOC Reviewer
(QIO)
Reviews LOC Assessment and makes determination.

Case Supervisor
(Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

Case Manager
(Case Management Agency)
Enrolls Individual in designated waiver program through KAMES.

Case Manager
(Case Management Agency)
Case Manager assigns Individual to a Case Manager.

Plan Reviewer
(QIO)
Approves prior authorization and submits the POC as “Current”.

Case Manager
(Case Management Agency)
Begins to perform case management activities.

Medicaid Waiver Management Application Instructor-Led Training
Lesson 1: MWMA Overview
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe the Capacity Review and Eligibility Determination process

• Describe targeting criteria and urgency of need determinations in MWMA

• Describe how space is reserved for an Individual in a waiver program.

Lesson Time: 45 minutes
Capacity Review and Eligibility Determination Overview

Waiver Program Eligibility is a phase of the application process in which:
- an Individual’s application is reviewed
- an Individual’s information is used to determine whether targeting criteria is met
- the appropriate urgency of need is determined, and
- available capacity within a waiver program is determined

If targeting criteria is met, the urgency of need merits immediate services, and the waiver has available capacity, the Individual can have their spot reserved to receive the waiver’s services.

If the urgency of need does not merit a reservation, or capacity is unavailable, the Individual may be placed on a waiting list to receive the waiver’s services.
Roles Involved in Capacity Review and Eligibility Determination

- **Application Reviewer**: Reviews information and uploaded documents, enters comments, and refers application to a waiver program.
- **Capacity Reviewer**: Reviews application information, determines if targeting criteria is met, the urgency of need, and available capacity.
- **Level of Care Assessor**: Meets with the Individual to complete the LOC Assessment.
How does the MWMA enhance and streamline the capacity review and eligibility determination process?

- Creates tasks for various roles involved in the review process, including:
  - A task for the Capacity Reviewer to review when the application is referred to the Capacity Reviewer’s waiver program.

- Enables the Capacity Reviewer to quickly redirect the Individual to another waiver if they are eligible for review in a different program.

- Allows the Capacity Reviewer to review all application information, make determinations, and reserve an available space in the waiver program in a quick and documented manner.
Capacity Review and Eligibility Determination Screens

MWMA includes the following screens that are used by the Capacity Reviewer:

- Dashboard
- Individual Summary
- Application Review Screens
- Urgency of Need and Waiver Capacity
  - Targeting Criteria
  - Urgency of Need
  - Waiver Capacity

The Capacity Reviewer first reviews the Individual’s application and views the same screens as the Application Reviewer. Once this is done, the sequence of screens and sections that display are dependent upon the Capacity Reviewer’s determination for targeting criteria, urgency of need, and waiver capacity.
Check Your Understanding

True or False:

The Capacity Reviewer can automatically reserve a space for an Individual in any waiver, regardless of urgency of need.
Check Your Understanding

Why is it important for the Capacity Reviewer to use MWMA for Eligibility Determination and Capacity Review?
Capacity Review and Eligibility Determination Recap

You should now be able to:

• Describe the Capacity Review and Waiver Eligibility Determination process

• Describe targeting criteria and urgency of need determinations in MWMA

• Describe how space is reserved for an Individual in a waiver program
MWMA Training Resources

The following resources provide additional information and instruction:

- **User Manual**: *User Guide: kynect Medicaid Waiver Management Application, Lesson 5*

- **Quick Reference Guides/Job Aids**:
  - *Using Targeting Criteria Quick Reference Guide*
  - *Urgency of Need and Waiver Capacity Quick Reference Guide*

- **Online Courses/Web-based Training (WBTs)**: *Determining Eligibility for Medicaid Waiver Services* course (4 lessons)
Medicaid Waiver Management Application (MWMA)

Lesson 6: Performing Assessments and Reassessments
Application Initiator (QIO) submits application.

Application Reviewer (QIO) reviews submitted application.

Capacity Reviewer (CHFS) determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor (Assessment Agency) completes LOC Assessment.

LOC Reviewer (QIO) reviews LOC Assessment and makes determination.

Case Supervisor (Case Management Agency) assigns Individual to a Case Manager.

Case Manager (Case Management Agency) begins to perform case management activities.

DCBS Caseworker (DCBS) enrolls Individual in designated waiver program through KAMES.

Case Manager (Case Management Agency) submits Plan of Care.

Plan Reviewer (QIO) approves prior authorization and submits the POC as “Current”.

MWMA Lifecycle
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Perform a Level of Care (LOC) agency assignment
• Schedule a (LOC) assessment
• Record LOC assessment results
• Upload supporting LOC assessment documentation for review

Lesson Time: 45 minutes
MWMA LOC Assessment Process Overview

• Individuals receive a correspondence to select an agency to perform their LOC assessment and contact the agency

• A Case Manager or Case Supervisor uses the correspondence and the LOC Agency Assignment screen to find the individual in MWMA and assign them to an assessment agency

• The “Perform Assessment” task generates within the assessment agency’s Level of Care Assessor user group task queue

• The Level of Care Assessor records the assessment details and attaches documents in MWMA after performing the initial LOC assessment

• Assessment details and supporting documents are submitted to the LOC Reviewer (QIO) via MWMA, for QIO to make a determination on the LOC assessment
Level of Care Agency Assignment - Dashboard Screen

Dashboard

Quick Links
- Message Center
  - Notifications Center
  - Case Management
    - Case Manager Assignment
    - View Assigned Case Managers
    - Add New Case Note
    - Manage Existing Case Notes
    - Initiate Transition
    - Manage Program Closures
    - View Case Load
    - View Reports
    - Additional Case Manager Resources

Other Links
- Quick Search
- Start New Application
- Manage Agency Relationships
- Print Blank Application
- Learn About Medicaid Waiver Services
- LOC Assessment
- Agency Selection

Tasks

<table>
<thead>
<tr>
<th>Select Queue</th>
<th>My Tasks</th>
<th>Group Tasks</th>
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</thead>
<tbody>
<tr>
<td>Tasks Assigned</td>
<td>9</td>
<td>188</td>
</tr>
<tr>
<td>Due</td>
<td>8</td>
<td>172</td>
</tr>
</tbody>
</table>

Tasks

<table>
<thead>
<tr>
<th>Task Name</th>
<th>App/Case #</th>
<th>Individual Name</th>
<th>Waiver Program</th>
<th>Status</th>
<th>Action</th>
</tr>
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<tbody>
<tr>
<td>Accept/Decline Case...</td>
<td>1000120187</td>
<td>Jackson, John</td>
<td>In Progress</td>
<td>Continue</td>
<td></td>
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<tr>
<td>Schedule Reassess...</td>
<td>1000096238</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
<tr>
<td>Initiate Annual Review...</td>
<td>100009528</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
<tr>
<td>Face to Face missing...</td>
<td>100019428</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
<tr>
<td>Face to Face missing...</td>
<td>10009528</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
<tr>
<td>Quarterly Summary...</td>
<td>10009528</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
<tr>
<td>Face to Face missing...</td>
<td>10009528</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
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<tr>
<td>Face to Face missing...</td>
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<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
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<td>Start</td>
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<tr>
<td>Face to Face missing...</td>
<td>10009528</td>
<td>Patrick, Gary</td>
<td>Acquired Brain Injury - Acute</td>
<td>New</td>
<td>Start</td>
</tr>
</tbody>
</table>

View History | Messages | Journals | Notes |
Level of Care Agency Assignment Screen

Medicaid Waiver Management Application Instructor-Led Training
Lesson 6: Performing Assessments and Reassessments
Level of Care Agency Assignment - Search Results Screen

<table>
<thead>
<tr>
<th>Individual Name</th>
<th>Case Number</th>
<th>DOB</th>
<th>Waiver Program</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHIP, CHOCOLATE</td>
<td>100019371</td>
<td>04/17/1957</td>
<td>ABI-Acute</td>
</tr>
</tbody>
</table>
Level of Care Agency Assignment- Successful Assignment Screen
Medicaid Waiver LOC Assessment Process

- **Appointment Scheduling**: The LOC Assessor receives a task to schedule an appointment for the assessment.

- **Documentation Upload**: The LOC Assessor records the assessment results and uploads necessary document(s).

- **Determination**
  - **Met**: A correspondence is sent to the Individual Authorized Representative to select and contact a Case Management Agency.
  - **Not Met**: A notification is sent to the Application Initiator describing why the LOC is “Not Met.”
  - **Lack of Information**: A task is triggered to the LOC Assessor to upload the additional documentation needed to make the LOC Determination.

- **Assignment**: The Individual Authorized Representative contacts the Case Management Agency and a Case Supervisor assigns a Case Manager.

- **Review**: The Application Initiator contacts the Individual Authorized Representative and reviews the “Not Met” decision.

- **Reconsideration Decision**
  - **Agree**: The LOC Assessment is submitted for reconsideration (outside of MAMIS).
  - **Disagree**: The CMA will monitor why the LOC was “Not Met and help facilitate the next steps.”

Lesson 6: Performing Assessments and Reassessments
Roles in the Medicaid Waiver LOC Assessment Process

- **Individual**
- **Authorized Representative**
- **Legal Guardian**

**Case Manager, Case Supervisor or LOC Assessor**

Receives correspondence to select and contact a case management agency.

Enters information found on the correspondence and assigns the Individual to their case management agency.

Medicaid Waiver Management Application (MWMA)
Roles in the Medicaid Waiver LOC Assessment Process

- **Level of Care Assessor**: Enters assessment results and uploads documentation after meeting with the Individual.
- **Level of Care Reviewer**: Reviews assessment results, uploaded documentation and records a determination.
- **Application Initiator**: Reviews information when the LOC is deemed “Not Met” and contacts the Individual to review the decision.
- **Case Management Administrator**: Monitors why the LOC was “Not Met” and helps facilitate the next steps.
How does the MWMA enhance and streamline the LOC Assessment and/or Reassessment process?

- MWMA enhances and streamlines current manual and paper-based processes by creating tasks for various roles involved in the assessment process, including:
  - A task for the LOC Assessor to perform the assessment
  - A task for the LOC Assessor to record results
  - A task for the LOC Reviewer to make a LOC determination

- Allows supporting documents to be attached to the LOC Assessment
- Allows comments to be inserted by the LOC Assessor when uploading supporting documents
MWMA LOC Assessment Screens

MWMA includes the following four assessment screens used by the LOC Assessor:

- Schedule Assessment
- Individual Summary
- Assessment Results
- Documents Needed
Class Exercise-
Scheduling Assessments and Recording a Level of Care Assessment

Exercise Time: 60 minutes
Check Your Understanding

True or False:

When you select the perform assessment task, you are required to schedule an assessment.
Medicaid Waiver Application Reassessment Overview

- An Individual’s LOC Reassessment process starts 40 days prior to their assessment end date.
- The LOC Reassessment can only be completed within 30 days of the assessment end date.
- Assessment details and supporting documents are attached resembling the LOC Assessment process.
Instructor Demo of MWMA—LOC Determination Process

Demo Time: 20 minutes
Check Your Understanding
What is one way MWMA enhances and streamlines the LOC assessment and/or reassessment processes?
Performing Assessments Recap

You should now be able to:

- Schedule a LOC assessment
- Record LOC assessment results
- Upload LOC assessment documentation for review
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 6*

• **Quick Reference Guides/Job Aids:**
  – *Level of Care (LOC) Assessment Agency Selection Quick Reference Guide*
  – *Assessment Determination Quick Reference Guide*
  – *Level of Care (LOC) Assessment Submission Quick Reference Guide*
  – *Supports Intensity Scale (SIS) Assessment Submission Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs):**
  – *Performing an Assessment for Medicaid Waiver Services* course (7 lessons)
  – *Performing a Reassessment for Medicaid Waiver Services* course (5 lessons)
Break
Medicaid Waiver Management Application (MWMA)

Lesson 7: Waiver Enrollment
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer (QIO)
Reviews submitted application.

Capacity Reviewer (CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor (Assessment Agency)
Completes LOC Assessment.

LOC Reviewer (QIO)
Reviews LOC Assessment and makes determination.

Case Supervisor (Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

Case Manager (Case Management Agency)
Begins to perform case management activities.

Case Manager (Case Management Agency)
Submits Plan of Care.

Plan Reviewer (QIO)
Approves prior authorization and submits the POC as “Current”.

DCBS Caseworker (DCBS)
Enrolls Individual in designated waiver program through KAMES.

Medicaid Waiver Management Application Instructor-Led Training
Lesson Objectives

Upon completion of this lesson, you will be able to:

- Describe how MWMA supports the waiver enrollment process
- Describe the system integration points between MWMA, KAMES, and MCI
- Describe the manual enrollment process

Lesson Time: 30 minutes
Waiver Enrollment Overview

- MWMA interacts with the Kentucky Automated Medicaid Eligibility System (KAMES) and the Master Client Index (MCI) to determine eligibility and update all systems with the correct Individual information.

- The KAMES system determines an Individual’s Medicaid eligibility.

- Once this occurs, DCBS enrolls the Individual in the waiver program, and MWMA sends out a nightly batch to update with the correct Individual information that is stored in MCI.

- If the nightly batch does not update correctly, a Case Management Administrator can manually enter an Individual’s enrollment information into MWMA.
Waiver Enrollment Process

1. **Criteria is Met**
   - Capacity Exists, LOC is Met, and Individual is Medicaid Eligible

2. **Enrollment Record Created**
   - Record created, task created for DCBS to enroll Individual

3. **DCBS Enrolls Individual**
   - DCBS enrolls Individual through KAMES

4. **Nightly Batch**
   - Batch updates information from MCI to MWMA

5. **Medicaid Eligibility Confirmed**
   - MWMA verifies Individual has correct Medicaid Eligibility for the waiver program

6. **Enrollment Info to MCI**
   - KAMES sends electronic Individual information to MCI
Roles Involved in Waiver Enrollment

- **Capacity Reviewer**
  - Reviews application information, determines if targeting criteria is met, the urgency of need, and available capacity

- **Level of Care Assessor**
  - Meets with the Individual to complete the LOC Assessment

- **Level of Care Reviewer**
  - Reviews the Level of Care Assessment and determines if Level of Care is met
Roles Involved in Waiver Enrollment

DCBS Worker

Enrolls the Individual in the designated waiver program, through KAMES, once the Individual has met all criteria

Case Management Administrator

Can manually enter an Individual’s enrollment information into MWMA in the event that the automatic batch does not update
How does the MWMA enhance and streamline the waiver enrollment process?

• MWMA serves to facilitate the enrollment process automatically, and only requires interaction in the event of an error.

• Enrollment information is recorded on a nightly basis through an automatic update.

• The interaction between systems like MWMA, KAMES, and the MCI allows each to have updated and current information.
Waiver Enrollment Screens

During manual enrollment, the following screens are used:

- Dashboard
- Individual Summary
- Program Summary Screen
- Enrollment Screen

In the event that the MWMA nightly batch does not automatically update, the Case Management Administrator has the ability to manually enter enrollment information for an Individual.
Check Your Understanding

True or False:

Any member of an agency can access the manual enrollment screen for an Individual.
Check Your Understanding

What are some of the ways that the Enrollment process will change due to MWMA?
Waiver Enrollment Recap

You should now be able to:

- Describe how MWMA supports the waiver enrollment process
- Describe the system integration points between MWMA, KAMES, and MCI
- Describe the manual enrollment process
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 7*

• **Quick Reference Guides/Job Aids:**
  – *Manual Enrollment Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs):** *Enrolling an Individual in a Medicaid Waiver Program course* (3 lessons)
Congratulations!

You have completed Day 1 of the Medicaid Waiver Management Application Instructor-led Training course!

Questions

Are there any unanswered questions or concerns regarding today’s training?

Coming up tomorrow…
Medicaid Waiver Management Application (MWMA) Instructor-Led Training (Day 2)
# Course Agenda – Day 2

<table>
<thead>
<tr>
<th>Topic</th>
<th>Minutes</th>
<th>Time</th>
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<tbody>
<tr>
<td>Recap of Day 1</td>
<td>15</td>
<td>8:30 – 8:45</td>
</tr>
<tr>
<td>Lesson 8: Case Management</td>
<td>60</td>
<td>8:45 – 9:45</td>
</tr>
<tr>
<td>Break (15)</td>
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<td></td>
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<tr>
<td>Lesson 9: Plan of Care</td>
<td>120</td>
<td>10:00 – 12:00</td>
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<tr>
<td>LUNCH</td>
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<tr>
<td>Lesson 10: Case Management (continued)</td>
<td>75</td>
<td>1:00 – 2:15</td>
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<tr>
<td>Break (15)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lesson 10: Case Management (continued)</td>
<td>45</td>
<td>2:30 – 3:15</td>
</tr>
<tr>
<td>Lesson 11: Transition to MWMA</td>
<td>30</td>
<td>3:15 – 3:45</td>
</tr>
<tr>
<td>Additional and/or Waiver-Specific MWMA Functionality</td>
<td>30</td>
<td>3:45 - 4:15</td>
</tr>
<tr>
<td>Wrap-up and Online Evaluation</td>
<td>15</td>
<td>4:15 – 4:30</td>
</tr>
</tbody>
</table>
Medicaid Waiver Management Application (MWMA)

Lesson 8: MWMA Initial Case Assignment
**MWMA Lifecycle**

- **Application Initiator**
  - Submits application.

- **Application Reviewer (QIO)**
  - Reviews submitted application.

- **Capacity Reviewer (CHFS)**
  - Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

- **LOC Assessor (Assessment Agency)**
  - Completes LOC Assessment.

- **LOC Reviewer (QIO)**
  - Reviews LOC Assessment and makes determination.

- **Case Supervisor (Case Management Agency)**
  - Case Supervisor assigns Individual to a Case Manager.

- **Case Manager (Case Management Agency)**
  - Begins to perform case management activities.

- **DCBS Caseworker (DCBS)**
  - Enrolls Individual in designated waiver program through KAMES.

- **Case Manager (Case Management Agency)**
  - Submits Plan of Care.

- **Plan Reviewer (QIO)**
  - Approves prior authorization and submits the POC as “Current.”
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe MWMA case management functionality on case assignment

• Perform initial case assignment

Lesson Time: 60 minutes
Overview of Initial Case Assignment by a Case Supervisor

• Once an Individual’s Level of Care (LOC) for a waiver program has been marked as met by the LOC Reviewer, a physical correspondence is sent to the Individual from MWMA.
  – The correspondence includes a list of case management agencies from which the Individual can choose.
• The Individual contacts one of the case management agencies
• A Case Supervisor from that case management agency accesses MWMA and searches for the Individual in the Case Manager Assignment screen, using information from the correspondence
• Once the Individual is located, the Case Supervisor assigns that Individual to one of the Case Managers in their case management agency
Case Management - Case Manager Assignment Screen

**Case Manager Assignment**

- **First Name**: KEN
- **Last Name**: TUCKIE
- **Case Number**: 100010967
- **Date of Birth**: 01/02/1934
- **Program**: Acquired Brain Injury
- **LOC End Date**: 09/23/2014

**Search**

**Individual Name**  | **Case Number**  | **DOB**  | **Program**  | **LOC End Date**
---|---|---|---|---
TUCKIE, KEN  | 100010967  | 01/02/1934  | ABI  | 09/23/2014

*Please assign a Case Manager for the individual being accepted:*

**Save**

**Back**

Medicaid Waiver Management Application Instructor-Led Training
Lesson 8: MWMA Case Management
Class Exercise-
Initial Case Assignment by a Case Supervisor

Exercise Time: 30 minutes
**Case Management - Initial Case Assignment Process Flows**

**Initial Case Assignment for Case Supervisors**

1. Once the Level of Care is marked as met, physical correspondence is sent to the Individual.
2. Individual/ Authorized Representative/Legal Guardian selects case management agency from list provided in physical correspondence and contacts the agency.
3. Case Supervisor from the selected case management agency accesses MWMA to search for the Individual and initiate case assignment with a Case Supervisor or Case Manager at their agency.

**Initial Case Assignment for Case Management Administrators**

1. Individual/ Authorized Representative/Legal Guardian contacts CHFS to request assignment of case management agency.
2. Case Management Administrator accesses MWMA to search for the Individual and initiate case assignment.
3. Case Supervisor group at the CMA makes a decision on the case assignment request.
4. Approval or Denial.
5. Initial Case Assignment.

---

Medicaid Waiver Management Application Instructor-Led Training
Lesson 8: MWMA Case Management
Overview of Initial Case Assignment by a Case Management Administrator (CHFS Staff)

- Once an Individual’s Level of Care (LOC) for a waiver program has been marked as met by the LOC Reviewer, a physical correspondence is sent to the Individual from MWMA.
- The Individual contacts CHFS for assistance in finding a case management agency within their area of preference.
- The Case Management Administrator accesses MWMA and searches for the Individual using “Quick Search”.
- Once the Individual is located, the Case Management Administrator navigates to the Individual’s Individual Summary screen and clicks “Submit Initial Case Assignment Request” from the Case Action column.
- The Case Management Administrator searches for a case management agency by County within the Submission of Initial Case Assignment Request to a Case Management Agency screen and submits an initial case assignment request to that agency.
### Medicaid Waiver Management Application Instructor-Led Training

**Lesson 8: MWMA Case Management**

#### Submission of Initial Case Assignment Request to a Case Management Agency

<table>
<thead>
<tr>
<th>Case Management Agency</th>
<th>Waiver Program</th>
<th>Address</th>
<th>Contact Person</th>
<th>Email</th>
<th>Contact Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kymera Case Management Services</td>
<td>SCL</td>
<td>Elmhurst Plaza 3rd floor</td>
<td>Ghosh, Bhaskar</td>
<td><a href="mailto:Ghosh@therman.com">Ghosh@therman.com</a></td>
<td>1999999999</td>
</tr>
</tbody>
</table>

*Required field*
### Accept/Decline Initial Case Assignment Request

**Individual Information**

<table>
<thead>
<tr>
<th>Individual Name</th>
<th>DOB</th>
<th>MAID</th>
<th>Waiver Program</th>
<th>Program Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diaz, Mason</td>
<td>01/01/1990</td>
<td>N/A</td>
<td>SCL</td>
<td>Pending Medicaid Eligibility for Waiver Enrollment</td>
</tr>
</tbody>
</table>

**Case Assignment Request Response Information**

- **Initial Case Assignment Request Submitted By:** Sullivan, Mark
- **Date and time of Initial Case Assignment Submission:** 03/17/2015 00:42:39
- **Initial Case Assignment Request Comments:** N/A

*Would you like to accept or decline this Individual?*

- [ ] Accept
- [ ] Decline

*Please assign a Case Manager for the individual being accepted:*

**Comments:**


How does the MWMA enhance and streamline the initial case assignment process

MWMA enhances and streamlines current manual and paper-based initial case management agency assignment processes through the following functionalities:

• Locating an Individual in MWMA universe
• Electronic assignment of case manager and case management agency
Check Your Understanding

True or False:

When an Individual contacts CHFS, the Case Management Administrator chooses a case management agency for the Individual.
Break
Medicaid Waiver Management Application (MWMA)

Lesson 9: Plan of Care
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer
(Q/O)
Reviews submitted application.

Capacity Reviewer
(CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor
(Assessment Agency)
Completes LOC Assessment.

LOC Reviewer
(Q/O)
Reviews LOC Assessment and makes determination.

Case Supervisor
(Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

Case Manager
(Case Management Agency)
Enrolls Individual in designated waiver program through KAMES.

Case Manager
(Case Management Agency)
Submits Plan of Care.

Plan Reviewer
(Q/O)
Approves prior authorization and submits the POC as “Current”.
Lesson Objectives

Upon completion of this lesson, you will be able to:

- Describe how MWMA supports the Plan of Care lifecycle
- Identify the MWMA user roles involved in the Plan of Care lifecycle
- Submit a Plan of Care in MWMA
- Describe the process of updating a Plan of Care

Lesson Time: 120 minutes
Plan of Care Overview

Within the MWMA, the Plan of Care (POC) function is used to create and execute an Individual’s POC. MWMA provides Case Managers with the tools to create POCs that support each Individual’s unique needs.

- “Create and Submit Plan of Care for newly assigned individual” task generates in Case Manager’s “My Tasks” queue
Plan of Care Lifecycle

**Initial Plan of Care Created**
A Case Manager completes the initial Plan of Care and submits the plan for review.

**Plan of Care Reviewed**
Based on information entered in the Plan of Care, the Plan will go to either a Case Supervisor, Case Management Administrator, or Plan Reviewer (QIO).

**Plan of Care is Finalized and made Current**
A Plan Reviewer (QIO) approves prior authorization and submits the POC as Current.
Roles in the Plan of Care Lifecycle

Case Manager
- Initiates the POC for an Individual and submits the POC to be reviewed.

Case Supervisor
- Reviews the POC and makes comments on data entered by the Case Manager.

Case Management Administrator
- Reviews the POC when there is a provider conflict or an exceptional rate/unit request.

Plan Reviewer
- Reviews the POC and submits a prior authorization decision.
How does the MWMA enhance and streamline the Plan of Care processes?

MWMA enhances and streamlines current manual and paper-based case management activities through the following functionalities:

• Generated tasks for each role when an action must be taken
• Ability to enter comments on a POC that are visible to all applicable roles in MWMA
• Ability to upload documents and attach them to the plan
MWMA POC Screens

The **Plan of Care Main Menu** screen is includes the following eight sections that constitute an Individual’s Plan of Care:

- Create Draft
- View Plan Details
- Goals
- Service Details
- Non-Waiver Service Details
- Service Summary
- Upload Documents
- Submit Plan
Overview of each section in Plan of Care

A general understanding of the following sections will be useful before we practice initiating and submitting a POC.

- Create Draft
- View Plan Details
- Goals
- Service Details
- Non-Waiver Service Details
- Service Summary
- Upload Documents
- Submit Plan
Accompanying Data and Documents are required for several waiver programs

Accompanying documents are required to be submitted for Individuals in the following waiver programs:
- Acquired Brain Injury (ABI)- Acute
- ABI- Long Term Care
- Supports for Community Living (SCL)

### All ADD components can be completed in MWMA that are highlighted below:

<table>
<thead>
<tr>
<th>Accompanying Data and Document (ADD) Module Component</th>
<th>Marked ADD component is viewable from the Individual Data Entry Main Menu screen for an Individual enrolled in:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>ABI-Acute</td>
</tr>
<tr>
<td>Individual Narrative</td>
<td></td>
</tr>
<tr>
<td>Crisis Prevention and Response Plan</td>
<td>X</td>
</tr>
<tr>
<td>Transition Plan</td>
<td>X</td>
</tr>
<tr>
<td>Medical Information</td>
<td>X</td>
</tr>
<tr>
<td>Health and Safety Information</td>
<td>X</td>
</tr>
<tr>
<td>Functional Information</td>
<td>X</td>
</tr>
</tbody>
</table>
Class Exercise-
Initiating and Submitting a Plan of Care

Exercise Time: 75 minutes
Check Your Understanding

True or False:

All services must be related to at least one goal/objective.
Check Your Understanding

How are service unit/rates calculated in MWMA from the Service Details section of the POC?
Plan of Care Recap

You should now be able to:

• Describe how MWMA supports the Plan of Care lifecycle

• Identify the MWMA user roles involved in the Plan of Care lifecycle

• Submit a Plan of Care in MWMA

• Describe the process of updating a Plan of Care
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 10*

• **Quick Reference Guides/Job Aids:**
  – *Plan of Care Status Quick Reference Guide*
  – *Service Units and Rate Quick Reference Guide*
  – *Determining Prior Authorization of Services Quick Reference Guide*
  – *Understanding the ADD Functionality in MWMA Quick Reference Guide*
  – *Using the ADD Module for ABI Waivers POC Submission Quick Reference Guide*
  – *Using the ADD Module for Supports for Community Living POC Submission Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs):** *Managing a Plan of Care course* (10 lessons)
LUNCH
Medicaid Waiver Management Application (MWMA)

Lesson 10: MWMA Case Management
MWMA Lifecycle

Application Initiator
Submits application.

Application Reviewer
(QIO)
Reviews submitted application.

Capacity Reviewer
(CHFS)
Determines if targeting criteria is met, determines urgency of need, and capacity in a waiver.

LOC Assessor
(Assessment Agency)
Completes LOC Assessment.

LOC Reviewer
(QIO)
Reviews LOC Assessment and makes determination.

Case Supervisor
(Case Management Agency)
Case Supervisor assigns Individual to a Case Manager.

DCBS Caseworker
(DCBS)
Enrolls Individual in designated waiver program through KAMES.

Case Manager
(Case Management Agency)
Begins to perform case management activities.

Case Manager
(Case Management Agency)
Submits Plan of Care.

Plan Reviewer
(QIO)
Approves prior authorization and submits the POC as “Current”.

Medicaid Waiver Management Application Instructor-Led Training
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Describe other MWMA case management functionalities
• Add and manage case notes
• Perform waiver case transfers
• Submit waiver program closure request
• Describe recording inability to access services in MWMA

Lesson Time: 120 minutes
MWMA Case Management Overview

Medicaid Waiver Case Management refers to the set of processes that enable Case Managers, Case Supervisors and other authorized users to provide case management services for an Individual. These processes include:

- **Case Note Management**
- **Caseload Management (Case Transfers)**
- **Program Closure Management**
How does the MWMA enhance and streamline the case management processes?

MWMA enhances and streamlines current manual and paper-based case management activities through the following functionalities:

- Electronic case notes entry and case notes management
- Electronic Internal and external case transfers
- Integrated waiver program closure and disenrollment
- Electronic recording of inability to access services
Overview of Managing Case Notes

Case Note Management involves the process of adding and managing case notes for an Individual. Once an individual is assigned to a case management agency, any Case Manager or Case Supervisor within that agency may add case notes to an Individual’s.

MWMA Case Note Types include:
- Face to Face
- Family Contact
- Indirect Contact
- Medical
- Monthly Summary
- On Call
- Provider Contact
- Quarterly Summary
At the end of each month, MWMA will check if mandatory case notes have been submitted for an enrolled Individual for the note period.

- If a mandatory case note is missing at the end of the month, a task will be generated for the assigned case manager to add the missing mandatory case note.
Case Management - Create a New Case Note Screen
SCL, Face to Face Case Note, and the KY Focus Tool

Every time a Face to Face Case Note is submitted for an Individual enrolled in SCL, the KY Focus Tool must be uploaded. MWMA will prevent the user from submitted a Face to Face Case Note without the KY Focus Tool.
Class Exercise - Adding Case Notes

Exercise Time: 10 minutes
Overview of Case Transfers

• The case management of waiver cases may be transferred internally within the same case management agency, or requested to be transferred externally to another case management agency.
• Only a Case Supervisor or a Case Management Administrator can transfer cases.
• When an internal or external case transfer is performed, all open tasks of the current Case Manager or Case Supervisor is transferred to the new Case Manager or Case Supervisor.
Case Management - Case Transfers screen: Internal Transfer

- Are all selected individuals being transferred to an external case management agency?
  - Yes
  - No

- Are all selected individuals being transferred to a single case manager internally?
  - Yes
  - No

- Select New Case Manager:

- Reason For Transfer:

- Comments:

The "Reason for Transfer" dropdown menu includes:
- Select
- Guardian Request
- Move from service area
- Person’s Request
- Other

Transfer button
Case Management – External Case Transfer Request Declined

Task Name: Case Transfer Request... Case Transfer Request Declined

Initial Case Assignment
02/24/2015
Request Response: Declined
Requesting Case Manager: Coleman, Kathy
Enrolled Program: Not Enrolled
Case #: 100016330

Reason: Cannot Support The Needs

Comment: N/A
Class Exercise-
External (Inter-Agency) Case Transfers

Exercise Time: 20 minutes
Overview of Program Closure and Disenrollment

Program closure involves the process of submitting and managing program closure requests through MWMA. Program closure also includes recording the inability of individuals to receive waiver services.

The following table lists the various scenarios that would lead to program closure:

<table>
<thead>
<tr>
<th>Program Closure Scenario</th>
<th>Timing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waiver capacity not met</td>
<td>Prior to waiver program enrollment</td>
</tr>
<tr>
<td>Level of Care not met</td>
<td></td>
</tr>
<tr>
<td>Medicaid Eligibility not met</td>
<td></td>
</tr>
<tr>
<td>Voluntary Disenrollment</td>
<td>Post waiver program enrollment</td>
</tr>
<tr>
<td>Involuntary Disenrollment</td>
<td></td>
</tr>
</tbody>
</table>
Case Management - Program Closure and Disenrollment Process Flow

Voluntary Disenrollment Only

Case Manager communicates program closure information to the Case Supervisor

Voluntary or Involuntary Disenrollment

Case Supervisor or Case Management Administrator accesses MWMA, searches for the individual, and completes the Request Program Closure screen.

If there are no errors, program status updates to “Pending Closure.” MWMA runs nightly closure batch, but program is closed based on the effective closure date. When nightly batch occurs on the effective closure date, waiver program status is updated to “Pending Disenrollment.”

A task is created for the DCBS staff to disenroll individual in KAMES

KAMES updates MCI with the individual’s disenrollment information

MWMA disenrollment batch captures the KAMES disenrollment

A task is created for the Capacity Reviewer to free up the waiver slot and the program is marked as closed

Medicaid Waiver Management Application Instructor-Led Training Lesson 10: MWMA Case Management
Case Management - Request Program Closure Screen

- **Closure Types** include:
  - Select
  - Involuntary
  - Voluntary

- **Closure Reasons** include:
  - Select
  - Death
  - Move out of state
  - No longer accessing services
  - No longer desire waiver
  - Transfer to other waiver

- **Effective Closure Date**
- **Program Closure Information**
- **Program Status**

- **Case Management Agency**
- **Case Manager**
- **Date of Birth**
- **Enrolled Program**
- **Individual Name**
- **MA ID**
- **Program**
- **Program Status**
- **Program Closure**
- **Submit Request**
- **Upload Document**
- **Caseload Management**
- **Manage Case Notes**
- **Add Case Note**
Class Exercise-
Submitting a Program Closure Request

Exercise Time: 30 minutes
Check Your Understanding

Why would it be a best practice to enter an effective program closure date that is in the future?
Overview of Temporary Discharge/Inability to Access Services

You complete an Inability to Access Services record in MWMA when an Individual is temporarily unable to access Medicaid waiver services for reasons including:

- S/he enters a nursing facility, Intermediate Care Facility for Individuals with Intellectual Disability (ICF-IID), a medical hospital, or a psychiatric hospital;
- There is no residence provider available;
- S/he is out of the state
Case Management - Recording Inability to Access Services

Program Closure: Recording Temporary Inability to Receive Waiver Services

Individual/Authorized Representative informs Case Manager that s/he is moving into a nursing facility, Intermediate Care Facility (ICF), or hospital.

Case Manager communicates the information to the Case Supervisor.

Case Supervisor enters inability to receive waiver services record in MWMA.

A task is created for the pool of DCBS staff to view the record information and make necessary updates in the KAMES system.

A task is created for the pool of QIO staff to view the record information and make necessary updates in the MAXMC system.

Medicaid Waiver Management Application Instructor-Led Training
Lesson 10: MWMA Case Management
Case Management - Recording Inability to Access Services

<table>
<thead>
<tr>
<th>Program Summary</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Program Details</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Waiver Program</th>
<th>Aquired Brain Injury - Acute</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Manager</td>
<td>Bhaskar Ghosh</td>
</tr>
<tr>
<td>Case Management Agency</td>
<td>Bhaskar Inc</td>
</tr>
<tr>
<td>Application Date</td>
<td>08/14/2014</td>
</tr>
<tr>
<td>LOC Start Date</td>
<td>08/14/2014</td>
</tr>
<tr>
<td>Last Action Date</td>
<td>08/14/2014</td>
</tr>
<tr>
<td>LOC End Date</td>
<td>08/04/2015</td>
</tr>
</tbody>
</table>

**Program Action**

- Upload Document
- Manage Plan of Care
- View Assessment History
- Record Inability to Access Services
- Add New Case Note
- Manage Existing Case Notes
- Request LOC Assessment
The “Reasons for inability to access services” dropdown menu contains the following choices:

- ICF-IDD
- Medical Hospital
- No Residence Provider Available
- Nursing Facility
- Out of State
- Psychiatric Hospital
- Other
Record inability to access services

Individual Details

<table>
<thead>
<tr>
<th>Individual Name</th>
<th>MA ID</th>
<th>DOB</th>
<th>Program</th>
<th>Case Manager</th>
<th>Case Supervisor</th>
<th>Case Management Agency</th>
<th>LOC End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATRICK GARY</td>
<td>02/02/1981</td>
<td>ABI-Acute</td>
<td>Ghosh Bhaskar</td>
<td></td>
<td></td>
<td>Bhaskar Inc</td>
<td>08/04/2015</td>
</tr>
<tr>
<td>PATRICK GARY</td>
<td>02/02/1981</td>
<td>SCL</td>
<td>Ghosh Bhaskar</td>
<td></td>
<td></td>
<td>Bhaskar Inc</td>
<td>08/04/2015</td>
</tr>
</tbody>
</table>

Inability to access service record details

- **Record 1**
  - **Record Date:** 09/23/2014
  - **Actual Start Date:** 09/23/2014
  - **Anticipated End Date:** 11/02/2014
  - **Reason for inability to access services:** Psychiatric Hospital
  - **Facility Name:** Memorial Neuropsychiatric Hospital
  - **Address:** 123 Main Street, Lexington, KY 40511

- **Is the currently enrolled program being closed for the individual?**
  - Yes
  - No

- **Actual End Date:** 09/23/2014

**Save** **Edit**

---

Medicaid Waiver Management Application Instructor-Led Training
Lesson 10: MWMA Case Management
MWMA Case Management Recap

You should now be able to:

- Describe MWMA case management functionalities
- Perform initial case assignment
- Perform waiver case transfers
- Add and manage case notes
- Record inability to access services
- Submit waiver program closure request
MWMA Training Resources

The following resources provide additional information and instruction:

• **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 9*

• **Quick Reference Guides/Job Aids:**
  – *Case Notes Quick Reference Guide*
  – *Initial Case Assignment Quick Reference Guide*
  – *Performing Case Transfers Quick Reference Guide*
  – *Recording Inability to Access Services Quick Reference Guide*
  – *Submitting a Program Closure Request Quick Reference Guide*

• **Online Courses/Web-based Training (WBTs):** *Performing Case Management in the Medicaid Waiver Management Application* course (9 lessons)
Medicaid Waiver Management Application (MWMA)

Lesson 11: Transition
Lesson Objectives

Upon completion of this lesson, you will be able to:

• Explain the process of transitioning an Individual into MWMA.

• Describe the system integration points between MWMA and MCI

• Use the applicable screens to transition an Individual to the MWMA system

Lesson Time: 40 minutes
Transition Overview

Before the implementation of MWMA, Kentucky’s Medicaid waiver programs were not supported by an automated system.

- The Transition process serves to transfer those Individuals receiving waiver services prior to the implementation of MWMA into the new electronic system.

- Components of MWMA have already occurred for these Individuals, as they are currently receiving services. They must now be entered into MWMA with the correct information.

- The Transition process involves both the interaction between systems like MCI and MMIS, as well as information review by a user in the system.
Transition Process Overview

Transition Initiated
A Case Manager or Case Supervisor accesses MWMA to transition Individual currently receiving services

Transition Record Created
Case Manager or Case Supervisor reviews the Individual’s record and confirms Level of Care

Transition Record Reviewed

Individual is Transitioned
Case Manager or Case Supervisor submits the Individual’s transition record into MWMA

Transition Reviewer reviews to resolve Level of Care inconsistencies

Medicaid Waiver Management Application Instructor-Led Training
Lesson 11: Transition
Roles Involved in the Transition Process

- **Case Manager**: Completes the Transition process for an Individual into the MWMA system.
- **Case Supervisor**: Completes the Transition process for an Individual into the MWMA system.
- **Transition Reviewer**: Examines an Individual’s situation when LOC dates are inconsistent and determines correct action.
Transitioning an Individual

- Before an Individual can be transitioned, their information must be verified in MCI
- Upon MCI verification, MWMA automatically pulls the Individual’s enrollment information from MMIS
- If the Individual’s case management agency identified in MMIS **does not match** your agency, you cannot continue with transition
- If the Individual’s case management agency **does match** your agency, you can continue to review the Individual’s enrollment information
- The Transition Individual screen will pre-populate with the Individual’s information that must be reviewed
Transition Timeline

- **MWMA Transition Period**: April 20, 2015 through July 20, 2015
- **LOC Reassessment and Transition**
  - If the LOC End Date is before June 30, 2015, perform the reassessment outside of MWMA, then transition the Individual to MWMA
  - If the LOC End Date is after June 30, 2015, transition the Individual, then record the reassessment results in MWMA
Transition Screens

The following screens are used in Transition:

- Waiver Transition Dashboard
- Transition Individual Information screen
- Transition Results screen

Depending on whether a Case Manager or Case Supervisor is transitioning the Individual, the Individual is automatically assigned to that Case Manager’s caseload, or the Case Supervisor assigns the Individual to a Case Manager from the case management agency.
Class Exercise-
Transitioning Individuals into MWMA

Exercise Time: 25 minutes
Check Your Understanding

True or False:

If an Individual’s case management agency differs from your own, you can proceed with the Transition process.
Check Your Understanding

How is the Transition process unique compared to other sections of the MWMA system or other processes?
Transition Recap

You should now be able to:

• Explain the process of transitioning an Individual into MWMA.

• Describe the system integration points between MWMA, MMIS, and MCI.

• Follow the applicable screens to transition an Individual to the MWMA system.
MWMA Training Resources

The following resources are provided for further information and instruction for this module.

- **User Manual:** *User Guide: kynect Medicaid Waiver Management Application, Lesson 8*

- **Quick Reference Guides/Job Aids:**
  - *Initiating an MWMA Transition Quick Reference Guide*

- **Online Courses/Web-based Training (WBT):** *Transitioning Individuals into the Medicaid Waiver Management Application Application course (3 lessons)*
Medicaid Waiver Management Application (MWMA) 
Instructor-Led Training
Course Wrap Up
MWMA information on CHFS website

http://chfs.ky.gov/dms/mwma.htm

MWMA Training Portal

Hosted by Eastern Kentucky University’s (EKU) learning management system, TRIS

http://tris.eku.edu/mwma/accountinfo.aspx#
Congratulations!

You have completed the Medicaid Waiver Management Application Instructor-led Training Course!

Questions

Are there any unanswered questions or concerns regarding today’s training?

Online Training Evaluation