



Policy Memo	
KDHE-DHCF POLICY NO: 2023-06-01	From: Erin Kelley, Senior Manager
Date: June 27, 2023	MKEESM Reference(s): 8241
RE: Choosing HCBS, Choice Dates, and Initial Resource Tests	Program(s): Long Term Care

The purpose of this memo is to provide guidance that an ES-3160 form can be accepted without a choice date and what dates to use for the initial resource test for an HCBS individual when the choice date is not provided. This guidance will help avoid case processing delays.

This policy is effective with the issuance of this memo. MKEESM will be updated with this information with the next scheduled revision.

I. BACKGROUND

The effective date of HCBS is when an individual has been assessed, found in need of long-term care services, chooses to receive HCBS services, and those services are scheduled to begin. The effective date is the actual date eligibility staff take action to approve coverage in the system. Due to this change implemented in January 2020, the HCBS choice date no longer impacts the effective date of HCBS.

II. POLICY

Effective with the issuance of this memo, the ES-3160 will be accepted without a choice date though it is still recommended that the choice date is provided. The 'Program Threshold Met' and 'Choose HCBS' sections continue to be required on the ES-3160.

A. INITIAL RESOURCE TESTS FOR SPOUSAL DETERMINATIONS

The following outlines what date to use for the initial resource test.

NOTE: As SSI is not a resource tested program, an initial resource test is not needed.

1. PREVIOUS STAY

If the individual had a previous hospital or nursing facility stay of 30 days or longer prior to the start of HCBS or being on the wait list, the start date of the initial stay will be used as the date for the initial resource test.

2. WAITING LIST

If the individual does not have an institutional stay of 30 days or more prior to being placed on the wait list, then the date the individual is placed on the wait list is used for the initial resource test.

3. HCBS NO WAITING LIST OR PRIOR STAY

If the individual does not have an institutional stay of 30 days or longer prior to HCBS and was not placed on a wait list, then the date one spouse is determined to qualify for HCBS services is used. This means they are assessed as in need of care, choose HCBS, and services are available. In most cases, the choice date from the ES-3160 is used for this date. However, if the choice date is blank, staff will use the date entered next to the 'Person Completing Section' field instead of holding up the process to request the choice date, which is not needed for any other purpose due to the change in effective dates.

B. WAIVER TO WAIVER TRANSITION

If an individual is already on HCBS and is changing from one waiver to another, the effective date on the ES-3160 is used. Per PM2019-06-02, this will generally be a future date coordinated between the Program Waiver Managers which provides timely notification of the change to the recipient. Staff will typically see these transitions occur prospectively however, they will not always. Unlike new HCBS requests, where the effective date of HCBS is the date in which the eligibility worker takes action to complete final authorization of coverage and an ES-3160 is sent to the MCO, active HCBS recipients that change from one waiver to another already have financial eligibility established and the level of care coded in KEES, therefore the waiver-to-waiver transition is treated as a change using the date as noted on the ES-3160.

Additionally, as the level of care is already established and the plan of care in place for the original waiver, a new plan of care (or provisional plan of care) is not needed in the case file prior to processing as the change and is handled by the MCO.

QUESTIONS

For questions or concerns related to this document, please contact the KDHE Medical Policy Staff at KDHE.MedicaidEligibilityPolicy@ks.gov.

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Questions regarding any KEES issues are directed to the KEES Help Desk at KEES.HelpDesk@ks.gov.