



## **Policy Directive 2016-08-02**

### **Title: Requesting Information - New Timelines**

**Date: August 26, 2016 (end-dated 7/31/2017)**

**From: Jeanine Schieferecke**

**Program impacted: All programs**

To All Eligibility Staff

Please note the following Policy Directive establishes new time frames regarding informational requests. There are two parts to this change. Both are effective immediately.

Please note that the Cut and Paste template is being updated with the new timeframes and will be available in the KEES Dispatch that will be released on Monday.

Please share with all staff immediately.

#### **Response Time to Submit Required Verification**

KEESM 1414.2 (3) and KFMAM 1406 require the agency to allow individuals at least 10 days to provide any required verification. The agency has traditionally used this standard when sending any requests for information. Effective immediately, all requests for information shall routinely allow the individual 15 calendar days to provide any necessary information. The new 15 day standard shall be used for all medical assistance requests.

This is applicable to requests for new applications, reviews, and case maintenance actions.

Any requests issued on or after this date shall use the new standard for the due date of the information. For requests previously issued but not yet acted upon, an additional 5 days shall be added to the original due date before taking negative action.

As always, an extension can be provided when requested by the individual. The extension shall be offered to anyone who contacts us regarding the time frame to supply information.

#### **Time Frame to Provide Information on a Denied Request for Coverage**

A request for medical coverage that was denied for failure to provide information is reconsidered if the information is provided within the later of the allowable time frame to process the request (45 for most, but 90 days if a disability determination is required) or the 10th day following the date the application was denied. These cases, commonly referred to as an Information Received on Denied (IROD), have coverage determined according to the original application date.

Effective immediately, the IROD deadline is changing from 10 days to 15 days. This means the deadline is the later of the 45th/90th day or the 15th day following the date of denial.