

UCare MSC+/MSHO

Care Coordination and Long-Term Services and Supports

Title: Capitation Deadlines for members' enrollment in Elderly Waiver (EW)

Purpose: To provide care coordinators guidance on Elderly Waiver assessment timeliness requirements as it relates to DHS capitation dates.

Summary: UCare is outlining expectations to focus on ensuring timely entry into the Minnesota Medicaid Information System (MMIS) prior to the capitation date for members open to EW. A successful and timely MMIS entry is essential for maintaining seamless EW coverage for individuals, ensuring accurate and timely payments, and overall system efficiency within the Medicaid program. For individuals on the Elderly Waiver, keeping MMIS updated with the correct rate cell before the capitation date is critical to maintain uninterrupted coverage.

Definitions:

MMIS: Minnesota's automated system for payment of medical claims and capitation payments for Minnesota Health Care Programs (MHCP).

<u>Capitation Date</u>: The DHS specified date each month for the Managed Care Organization to have MMIS updated with the member's current assessment results.

<u>Waiver Eligibility Span</u>: The effective date of the screening document establishes the start of the eligibility span. An eligibility span of 12 months develops with the end date being the last day of the twelfth month. An eligibility span cannot exceed a 12-month time frame.

Rate Cell: A specific payment category for individuals receiving home and community-based services, depending on the enrollment status in the Elderly Waiver (EW) program.

<u>Rate Cell A</u>: Applies to community members who are not enrolled in the Elderly Waiver (EW) program, meaning they are not receiving EW services and are not considered "nursing home certifiable."

<u>Rate Cell B:</u> Applies to community members who are enrolled in the Elderly Waiver program. These individuals are considered "nursing home certifiable" and are receiving at least one Elderly Waiver service.

Assessment Completion Considerations

All must be met:

- Completed prior to Day 365 (compliance requirement)
- Completed prior to the end of the current waiver span (avoids disruption of services)
- Completed prior to the CAP date of the month the waiver span is ending
 - Refer to the <u>Managed Care Key Dates</u> published by DHS and listed below.
 - Note: Initial assessments must be completed within 30 days of enrollment and ideally, prior to capitation to allow time for Ucode removal as necessary. Also, NO EW services should be authorized until the Ucode is removed and EW is officially opened.



Recommendations

- UCare recommends seeing someone in the 11th month of their waiver span to assist with meeting the above timeframes. At a minimum, start outreach in the 11th month.
- The waiver span dates should remain on the same cycle each year unless one or more of the above requirements cannot be met.
- Assessments are valid for 365 days. An effective date can be up to 60 days in the future. It is not
 necessary to pull someone ahead 30-60 days each year to meet the above timeframes. A gradual
 progression of time in between each reassessment maintains waiver spans and meets due dates.

Examples

Care coordinators should continue the same waiver span year after year. The examples below illustrate how a waiver span can typically remain unchanged for several years before needing adjustment.

Reassessment Year 1:

- Assessment Activity date: 2/10/2022
- Effective date 3/1/2022
- Wavier span 3/1/22-2/28/23
- Note: Enter prior to CAP date for Feb 2022

Reassessment Year 2:

- Assessment activity date 2/5/2023
- Effective date 3/1/2023
- Waiver span 3/1/23 2/29/24
- Note: Enter prior to CAP date for Feb 2023

Reassessment Year 3:

- Assessment Activity date 1/26/2024
- Effective date 3/1/2024
- Waiver span 3/1/24 2/28/25
- Note: Enter prior to CAP date for Feb 2024

Reassessment Year 4:

- Assessment Activity date 1/15/2025
- Effective date 3/1/2025.
- Wavier span 3/1/25 2/28/26
- Note: Enter prior to CAP date for Feb 2025 and within 30 days of 1/15/25

Reassessment Year 5:

- Assessment activity date 1/8/2026
- Effective date 3/1/2026
- Waiver span 3/1/26 2/28/27
- Note: Enter prior to CAP date for Feb 2026 and within 30 days of 1/8/26

Reassessment Year 6:

- Assessment activity date 12/21/26
- Effective date 2/1/27
- Note: New waiver span 2/1/27 1/31/28
 - Assessment occurred outside the 60-day window from the current waiver span START date.
 - Waiver span must be adjusted to comply with the 60-day rule and CAP requirement



Note: The above example illustrates how a waiver span can typically remain unchanged for several years before needing adjustment.

2025 DHS MMIS Capitation Dates

DHS identifies the monthly capitation dates and updates annually on the DHS website: <u>Health plan</u> <u>systems workgroup / Minnesota Department of Human Services</u>

Enrollment/Effective Month	CAPITATION DATE
July 2025	06/23/25
August 2025	07/24/25
September 2025	08/22/25
October 2025	09/23/25
November 2025	10/24/25
December 2025	11/19/25
January 2026	12/23/25

Tips

- To help maintain uninterrupted waiver coverage, MMIS entry deadlines should be clearly prioritized. Calendar reminders and internal alerts are effective management tools to help prevent unintentional lapses in waiver eligibility and funding.
- Timely submission of DHS 5181 and DHS 3543 documents to the county financial team for review and removal of U code.
- To prevent the rate cell changing from **B to A**, the annual reassessment visit (due in the **12th month** of the eligibility span) must be entered into MMIS **before the capitation date** for that month. Please refer to the grid above and the DHS website for specific deadlines.
 - Important: Rate cell changes cannot be corrected retroactively.
- For more information about EW Capitation dates, please see the <u>Care Coordination Manual Part 2:</u>
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