



Department of Human Resources
 311 West Saratoga Street
 Baltimore MD 21201

FIA ACTION TRANSMITTAL

Control Number: # 17-5

Effective Date: Upon Receipt

Issuance Date: September 1, 2016

**TO: DIRECTORS, LOCAL DEPARTMENTS OF SOCIAL SERVICES
 DEPUTY/ASSISTANT DIRECTORS FOR FAMILY INVESTMENT
 FAMILY INVESTMENT SUPERVISORS/ELIGIBILITY STAFF
 DIVISION OF ELIGIBILITY WAIVER SERVICES
 LOCAL HEALTH DEPARTMENT ELIGIBILITY STAFF**

FROM: TRACEY C. PALIATH, EXECUTIVE DIRECTOR *Tracey Paliath*
DEBBIE RUPPERT, EXECUTIVE DIRECTOR, DHMH/OES *Debbie Ruppert*

RE: IMPROVING CUSTOMER SERVICE

PROGRAM AFFECTED: LONG TERM CARE MEDICAID

ORIGINATING OFFICE: OFFICE OF OPERATIONS

SUMMARY:

Long Term Care customers and their authorized representatives often do not understand the complexity of the Medicaid policy and have questions and concerns regarding the eligibility process and documentation requirements. Without accurate information, the processing of their applications and redeterminations can be delayed unnecessarily.

In an effort to improve customer service and process applications within 30 days, direct communication is critical between the Case Manager and the Long Term Care customer or the authorized representative early in the application process.

REQUIRED ACTION:

Effective immediately, Case Managers must call the customer or the customer's authorized representative after reviewing an application, redetermination, or interim change if additional information or further explanation of information is needed in order to process the action. The Case Manager must make at least one attempt (to each telephone number provided or obtained) to reach the customer or authorized representative by telephone. Make sure to leave a message for a return call.

Suggested message

Good morning, my name is [your name]. I am a case manager with the [your agency]. I am calling to discuss the Long Term Care [application/redetermination/interim change] for [customer's name]. I would like to review the [application/redetermination/interim change], explain the information that is

still needed to process the case and answer any questions you may have. Please contact me at your earliest convenience at [your phone number].

If a telephone number is not provided or cannot be obtained, write a note on the 1052 for the customer/authorized representative: “Please call me to review information needed and to answer any questions you may have.”

When contact is made, the Case Manager must explain the purpose of the call:

- to acknowledge receipt of the application, redetermination or reported change,
- to review the information provided on the application, redetermination or reported change,
- to clarify any documentation or other information that is required, and
- to answer any questions regarding the process or the required information.

Narrate in CARES that the telephone call was conducted, and include the date of the call and the result of the call. ***Do not delay the processing of the action if the customer or authorized representative is not available for the telephone conversation.*** Narrate the attempt(s) you made to contact them.

Note:

If a customer or authorized representative requests a face-to-face interview, you must comply with this request and schedule one to take place as quickly as possible.

TELEPHONE TIPS

The call is a structured communication for the purpose of gathering necessary customer information to assist in determining eligibility. Its success depends on the skill of the interviewer and the rapport that develops between the interviewer and the customer.

1. Plan the telephone call by preparing the Request for Information (Form 1052) in advance.
 - Get organized
 - Define what you need from the customer or the authorized representative
 - Familiarize yourself with relevant past and current information
 - Write down all information needed
 - Gather complete and accurate information
2. During the call:
 - Confirm your understanding of the circumstances by reviewing all information provided on the application, redetermination or interim change.
 - Ask questions until you are clear on all issues,
 - Request the customer to confirm or repeat answers listed on the application back to you.
 - Review and explain all the information being requested on the 1052.

- Use a good closing statement to prevent unnecessary and time-consuming phone calls to and from customers.

Examples: “Is there anything else you need to tell me before we hang up?”

“Do you have any questions for me?”

“Do you understand what information you need to send/bring in?”

“Do you understand all that we talked about?”

INQUIRIES:

Please direct questions regarding this Action Transmittal to Debbie Rizzo, Bureau of Long Term Care at drizzo@maryland.gov or 410-455-7713. Please direct MA policy questions to the DHMH Division of Eligibility Policy to DHMH.maltceliqibilitypolicy@maryland.gov or call 410-767-1463 or 1-800-492-5231 (select option 2 and request extension 1463).

cc: DHR Executive Staff
DHMH Executive Staff
FIA Management Staff
Constituent Services
DHR Help Desk