

Medicaid Annual Reviews

Guidance Document for Assisting Consumers

Family Support Division Annual Review Process

Medicaid recipients are required to have an **annual review of eligibility**. Sometimes this is referred to as an annual *reinvestigation, reauthorization, or re-certification*. In the month prior to the review month, the Family Support Division (FSD) mails an annual review form (FA-402) to the consumer that is due back on the first working day of the review month. The form is mailed on the Monday after the first Saturday of the month prior to the review month. For example, August 2014 review forms were mailed on July 7 and due back to FSD on August 1. If the form is not received and entered in the FSD computer system by the due date, a 10 day advance notice to close the Medicaid is sent to the consumer the next day. The **Medicaid is closed 10 days later if the form still has not been received**, unless the consumer requests an appeal in the 10 days. If the review is completed and there is no change in Medicaid eligibility, a notice is not sent to the consumer confirming the continued eligibility.

DMH Report of Consumers Due for Annual Review

On the 3rd of each month DMH produces a report listing cases due for a Medicaid annual review for each CMHC, behavioral health institution, DD regional office, and ADA provider. Agencies should use the report to assist consumers in submitting an annual review form to FSD by the due date on the report. **The reports are in the CIMOR Info Center under Reports on FTP Site:**

- In the agency/facility's file, open the reports folder, then open the CPS or ADA folder.
- Report name is "MedicaidReauths(MEIS)" preceded by the date of the report YYYYMMDD.
- Report has two parts: "Due Within Three Months" and "Overdue or Closed Within Last Three Months."
- The "Due Within Three Months" section of the report shows the consumers due for a review in each of the next three (3) months. For example, the July 3 report shows the reviews due August 1, September 1 and October 1.
- **Staff should not wait for the consumer to receive the form mailed from FSD to start the process.** Instead, staff should help the consumer complete the old paper review form IM-2D (available at <http://dss.mo.gov/fsd/formsmanual/pdf/im2d.pdf>) and submit it by the due date. FSD memorandum IM-33 http://dss.mo.gov/fsd/iman/memos/memos_11/im33_11.html dated June 9, 2011, states the IM-2D is still acceptable.

- The review forms should be sent to the FSD office in the county listed on the report. FSD office addresses are available at the dss.mo.gov home page under “Food, Health Care, Family Care.” Some mailing addresses are in a county different than the county in which the consumer resides.
- Agencies should prioritize consumers on the report that have paperwork due the month of the report (in the overdue section) and the ones due the next two (2) months.
- Those that were due in the current month (7/1 on the July report) are still active, but likely have been sent a notice the Medicaid will close in 10 days. These need to have the form submitted by about the 12th of the month in order to prevent the Medicaid from closing.
- For those due the first day of the month following the report month (8/1 on the July report), make sure the forms are completed and submitted to FSD **before the end of the month of the report.**
- For those due the first day of the second month following the report month (9/1 on the July report), make plans to assist the consumer in completing the form so you can submit it early in the month before the due date.

Note: Review forms should not be submitted prior the month before the due date. When a form is submitted earlier, FSD will not be ready to process the review. Thus, the form will be scanned into a file, but will not be assigned to a worker to review. Then, when the review is actually due, the FSD worker may not know it has been received and **the eligibility system closes the Medicaid.**

- Those on the report that have a due date prior to the month of the report have either been closed or have remained open without a review. Check CIMOR to see if the Medicaid is closed. If it is and you know the form was submitted, email Charles Bentley at charles.bentley@dmh.mo.gov. Otherwise a new application should be submitted for the consumers that are closed. No action is necessary on those that remain open.
- The report has a “Medical” column, if Medical is in the column that means the consumer’s disability has been determined by the FSD rather than by Social Security. New medical records will have to be submitted at some point to FSD, but are **NOT** required at the time of the annual review. DMH is working on ways to let DMH agencies know when to submit the medical records.