

**Kentucky Department for Medicaid Services
Division of Community Alternatives
Whom to Call Listing**



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| Medicaid Eligibility Questions | | |
| Who can apply for Medicaid? | <p>Individuals / Family Members</p> <ul style="list-style-type: none"> Individuals and family members can apply for Medicaid using kynect.ky.gov. Kentucky residents and authorized representatives can apply for food assistance, cash Assistance, and Medicaid on kynect.ky.gov. Individuals or family members may contact the Department for Community Based Services (DCBS) or visit their local DCBS office. Individuals, family members, and authorized representatives may also contact their local Community Mental Health Center (CMHC) or Area | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> |

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| | <p>Agency on Aging and Independent Living (AAAIL) for assistance with the integrated Medicaid waiver application.</p> <p>Authorized Representatives / Legal Guardians</p> <ul style="list-style-type: none"> An authorized representative may apply on behalf of the individual (by providing the appropriate documentation). When applying on kynect.ky.gov, the appropriate forms are generated to confirm the authorized representative's status. <p>Case Manager / Application Initiators</p> <ul style="list-style-type: none"> From the Medicaid Waiver Management Application (MWMA) dashboard, Case Managers / Application Initiators can apply using an integrated application for Medicaid and waiver services. MWMA prompts you to complete the appropriate data based on the individual's information. <p>NOTE: If the individual has been denied Medicaid services before, they may re-apply at any time. If the individual chooses to apply via MWMA, the system walks the individual through the appropriate data based on the individual's information. If the individual chooses to apply for Medicaid via phone or in-person, an interview is required.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email: 1915(c) HCBS Waiver Help Desk (844) 784-5614, option #3 1915cWaiverHelpDesk@ky.gov</p> <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |
| Where do I find information about a pending Medicaid application? | <ol style="list-style-type: none"> Select Quick Search from the MWMA Dashboard. Search by Identifier Type or enter the name in the First Name / Last Name field. Click on Individual Name, and this takes you to the Individual Summary. Click on Go To kynect Dashboard from the right column under Case Action. | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> |

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| | <ol style="list-style-type: none"> 5. Under the Ongoing Applications section, look in the Action Required column for a status. 6. Direct Service Provider/Direct Service Provider Supervisor users may not have access to the kynect Dashboard | DCBS (855) 306-8959 DFS.Medicaid@ky.gov |
| Where do I find the letter showing the reason(s) for denial or discontinuance from Medicaid? | <ol style="list-style-type: none"> 1. Select Quick Search From the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name, this takes you to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. Click on Messages from the kynect Dashboard. 6. Direct Services Provider/Direct Service Provider Supervisor users may not have access to the kynect Dashboard 7. At the Message Center, select the notice with the subject of Notice of Eligibility (Non-MAGI) / Health Benefits Eligibility Notice (MAGI) for denial and discontinuance. | For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov |
| Where can I upload documents for Medicaid? | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter a name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. From the kynect Dashboard in the Request for Information section, click Upload. | For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov |

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| | <p>NOTE: When the document(s) are uploaded, a task is created for DCBS. The task will be worked according to the task due date. In addition to uploading documents, they may also be faxed, mailed, or hand-delivered to the local DCBS office. Once the documents are submitted, DCBS has up to 30 days to process the documents.</p> | |
| <p>Whom can DCBS talk to about your Medicaid case?</p> | <p>DCBS may talk to the following:</p> <ul style="list-style-type: none"> • Applicant • Applicant’s spouse • Parents of minor children (under 18) • Power of Attorney • Legal guardian • Statutory benefit payee • Authorized representative as designated by the MAP-14 https://chfs.ky.gov/agencies/dms/MAPForms/MAP14.pdf • Providers <p>NOTE: DCBS can talk to providers prior to Medicaid approval, only if the applicant has completed and signed form DCBS-2 Informed Consent and Release of Information and Records. Per HIPPA requirements, DCBS cannot share information with providers until Medicaid has been approved.</p> | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |
| <p>My client has a Medicaid case, but it is not paying for waiver services.</p> | <p>Please be aware there are types of Medicaid assistance that will not pay for waiver services. The three main types are:</p> <ol style="list-style-type: none"> 1. The Medicare Savings Program, also referred to as a Qualified Medicare Beneficiary (QMB), has three categories, SLMB, QI1, and QMB. SLMB or | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> |

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| | <p>QI1 pays for the Medicare Part B (medical insurance) premium only. QMB pays for Medicare copays and deductibles, but none of them will pay for waiver services.</p> <ol style="list-style-type: none"> 2. Medicaid expansion for low-income adults is called ADLT Medicaid. ADLT pays for many of the same things as other types of Medicaid assistance, but it will not pay for waiver services. 3. KCHIP III is sometimes called P7. This program provides medical coverage for uninsured children under the age of 19, whose countable household income falls between 160% and 218% of the federal poverty level. KCHIP III does not pay for any long-term care, including waiver services. <p>NOTE: If you encounter an issue not listed above, where waiver services are not being paid, please contact DCBS.</p> | <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |
| <p>What can we do to get the type of Medicaid that will pay for waiver services?</p> | <p>To obtain the type of Medicaid that pays for waiver services, contact DCBS or visit the local DCBS office to report that the individual desires waiver services and needs to make changes to their current Medicaid case to see if they are eligible. The DCBS worker will review the eligibility and recommend the action needed.</p> | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |
| <p>Checklist for applying for long term care Medicaid</p> | <p>When applying for Medicaid for an individual residing in a nursing facility or receiving waiver services, the following information must be provided to DCBS:</p> <p>Basic Information</p> <ul style="list-style-type: none"> • Full legal name (as shown on the Social Security card) | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> |

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| | <ul style="list-style-type: none"> • Social Security Number • Date of Birth • Authorization to apply (not required for a spouse) <ul style="list-style-type: none"> ○ Power of Attorney ○ Legal Guardianship ○ MAP-14 (authorized representative form) <p>NOTE: The MAP-14 can be obtained at any DCBS office or from the DMS website at https://chfs.ky.gov/agencies/dms/MAPForms/MAP14.pdf</p> <p>Income from all sources, including but not limited to:</p> <ul style="list-style-type: none"> • RSDI (Social Security) • Railroad Retirement • Pensions • IRA, 401K, etc. (verification of required minimum withdrawal and any distributions) • Wages, self-employment, farm, or rental income • Long-term care insurance (copy of the policy and verification of any payments) <p>Verification of gross income before any withholdings is required. If the total gross income is above the special income standard (\$2,382 - effective 1/1/2021), a Qualifying Income Trust (QIT) will be required.</p> | <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |

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| | <p>Resources (all resources belonging to the applicant and members of their household)</p> <ul style="list-style-type: none"> • Current month's balance and statements for the prior 3 months for all liquid resources, including but not limited to: <ul style="list-style-type: none"> ○ Checking accounts ○ Savings accounts ○ Nursing facility resident accounts ○ Direct Express (or other money cards) ○ Certificates of deposit • Life insurance policies and current face and cash value • Pre-arranged funeral contracts and verification of funding • Property, including life estates • Annuities (complete copy of all annuities) • Trusts (complete copy of any trusts and verification of funding) • Caregiver or Lifetime care agreements • Promissory notes or land contracts • Home equity plans, including reverse mortgages <p>Health Insurance</p> <ul style="list-style-type: none"> • Medicare Card or Medicare claim number and effective date • Other health insurance cards/information <p>Medical expenses</p> <ul style="list-style-type: none"> • Medicare premiums, including part D premiums | |

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| | <ul style="list-style-type: none"> • Medicare supplemental premiums • Other health insurance premiums (including vision or dental) <p>Household Members</p> <ul style="list-style-type: none"> • Income • Resources • Shelter expenses <ul style="list-style-type: none"> ○ Mortgage, along with insurance and taxes ○ Rent ○ Utilities (heating/cooling, water, trash, and phone) <p>NOTE: Please be aware that this is not an all-inclusive list. Based on the information you provide, the DCBS caseworker may require additional verification. You should have the information listed under “Basic Information” above at the time you apply; however, you will have 30 days to provide verification of income, resources, expenses, etc. If you find that you need additional time, please contact DCBS to request an extension. Let them know what efforts you have made to obtain the required verification and the additional amount of time needed.</p> | |

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| <h3>MWMA Waiver Eligibility Questions</h3> | | |
| <p>How do I check the status of an MWMA application?</p> | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Applications from the right column under Case Action. 5. Click on the Application #. 6. From the Application Tracker, view the Application Status. <p>NOTE: The possible status types are Saved, Submitted, Resubmitted, Complete, and Incomplete.</p> | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>What do I do if an MWMA application status is showing an incomplete status or an individual has received a waiver RFI?</p> | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on Update Application from the right column under Case Action. 5. From this screen, you can view what updates are required. If a document is required, on the Document Upload screen, a red X will be present. 6. After uploading all mandatory documents, the red X changes to a green “√”. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| | <p>7. Click submit, and a task is created for the application reviewer.</p> <p>NOTE: After the status changes to Submitted and all the mandatory document(s) are uploaded, a task is created for the application reviewer. The application reviewer will review the application by the task due date.</p> | |
| <p>What does an MWMA application status showing complete mean?</p> | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Click on Individual Name; this to the Individual Summary. <ol style="list-style-type: none"> a. Under the Waiver Program Information section, the Program Status shows as Waiver Review (If the Program Status shows Waiver Review, then a task is generated and sent to the capacity reviewer). <p>Under the Individual Information section, Case Status shows Closed-Doesn't Meet Targeting Criteria (If the Case Status shows Closed-Doesn't Meet Targeting Criteria, a letter is sent to the individual notifying them they do not qualify for waiver services. The letter includes a listed of other suggested resources. NOTE: The individual may always reapply.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>Where do I see why a waiver application was denied?</p> | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Applications, from the right column under Case Action. 5. Click on the Application #. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk</p> |

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| | 6. From the Application Tracker, view the Actions Comments. | (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov |
| How do I upload a document that pertains to the individual's record? | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Documents, from the right column under Case Action. 5. From View Documents, select Add Another Document to upload any document about the individual's record. <p>NOTE: Uploading a document through View Document will not trigger any tasks.</p> | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| How do I view letters that have been sent via MWMA? | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Click on Individual Name; this to the Individual Summary. 4. Click on Message Center, from the right column under Case Action. 5. From the Message Center, the letters sent to the individual are displayed. | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> |

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| | <p>6. The ability to review waiver correspondence is based on the user's profile. Direct Service Provider and Direct Service Provider Supervisor user groups will not have access to all waiver correspondence types, including the LOC determination letter.</p> | |
| I do not have a task. How do I upload a reassessment? | Please contact MWMA Technical Contact Center if a task is needed and no task has been created for the case. | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> |
| What should I do if I see Pending Medicaid Eligibility for Waiver Enrollment as the Program Status? | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Click on Individual Name; this to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. From the kynect Dashboard in the Request for Information section, upload all documents listed in this section. 6. If no documentation is needed, the individual may need to reapply or contact DCBS for their Medicaid status. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| | <p>NOTE: Medicaid eligibility information is also sent to the individual in the “Waiver Level of Care Determination” Letter generated by MWMA.</p> | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |

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| Level of Care Questions | | |
| <p>Where do I see why I received a Lack of Information (LOI) for a level of care?</p> | <ol style="list-style-type: none"> From the MWMA Dashboard, under Task, click start for LOI task. From the Level of Care Assessment Results Summary, view the Assessment Activity section for comment. Complete the “Level of Care” process based on the request from CHFS. <p>MWMA also sends a letter for lack of information to the individual. You may view the electronic copy under the Message Center, under Case Action.</p> | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>Where do I see why the LOC was denied?</p> | <ol style="list-style-type: none"> Select Quick Search from the MWMA Dashboard. Search by Identifier Type or enter the name in the First Name / Last Name field. Click on Individual Name; this takes you to the Individual Summary. Under the Waiver Program Information section, the Program Status shows Level of Care Not Met. Click on Assessment History from the right column under Case Action. | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> |

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| | <p>6. From View Assessment, Click on the arrow (▾) next to the appropriate Program Assessment.</p> <p>7. Click on the arrow (▾) next to the appropriate Assessment Type with the most recent assessment date.</p> <p>8. Click on View Details to see the Assessment Activity section for comments on why the LOC was denied.</p> <p>NOTE: If the individual is associated with a case manager, then the case manager receives a notification under their Message Center for this status: Assessment / Reassessment Not Met for Individual.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>Where do I see the status after I have submitted a LOC request in MWMA?</p> | <p>1. Select Quick Search from the MWMA Dashboard.</p> <p>2. Search by Identifier Type or enter the name in the First Name / Last Name field.</p> <p>3. Click on Individual Name, this takes you to the Individual Summary.</p> <p>4. Under the Waiver Program Information section, the Program Status shows the status.</p> <p>NOTE: Before CHFS completes the review, the status shows Pending LOC determination, and after CHFS completes the review, the possible status types are the following:</p> <ul style="list-style-type: none"> • Level of Care Pending LOI • LOC Not Met • Pending Medicaid Eligibility for Waiver Enrollment with approved LOC Dates <p>NOTE: If the individual is associated with a case manager, then the case manager receives a notification under their Message Center for these two statuses only: LOC Met / Not Met for an Individual.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| <p>How do I upload a document in response to an LOI request for more information?</p> | <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Task, click start for Lack of Information task. 2. From the Level of Care Assessment Results Summary, view the Assessment Activity section for comment. 3. Click Next on the Level of Care Assessment Results Summary. This action takes you to the Diagnosis section. If information is needed, then update this section. 4. Click Next to go to the Documents Upload. 5. From the Documents Upload, upload required documents. | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>Whom do I call if my LOC dates are wrong in MWMA?</p> | <p>Contact the 1915(c) Waiver Help Desk if the LOC dates are incorrect and need to be corrected. Please be prepared to provide the participant information, the waiver type, the dates currently given for LOC, and the corrected dates.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| Plan of Care Questions | | |
| <p>Where do I see the status after I have submitted a Person Centered-Service Plan (PCSP) request for MWMA?</p> | <p>From the MWMA Dashboard, under the Plans of Care section is where you see the status.</p> <p>NOTE: The possible statuses are the following:</p> <ul style="list-style-type: none"> • Draft (Plan has not been submitted by CM/CS) • Current (Plan is approved) • Current-Pending Start Date (Plan start date is after the current date) • Pending Supervisor Review (Plan is with case supervisor) • Pending Review (Plan is with CHFS) • Pending CMA Review (Plan is with CMA) • Pending Reconsideration (Reconsideration review is pending) • Revisions Requested by Supervisor (CS needs additional information) • Revisions Requested by Plan Reviewer (CHFS needs additional information) • Revisions Requested by CMA Reviewer (CMA needs additional information) <p>NOTE: A notification is sent to the case manager’s Message Center for the following status (Current and When Submitted by Supervisor).</p> | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>I have sent a PCSP request/modifications to CHFS. How do I know the status?</p> | <p>From the MWMA Dashboard, under the Plans of Care section, the status displays Pending Plan Reviewer Review. The task will be worked by the task due date.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> |

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| Where do I see why I received an LOI (or Revision Requested by Plan Reviewer) for a PCSP? | <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Tasks, find Revisions Requested by Plan Reviewer task and then click start. 2. From the Service Details; Select the Radio button for all CM Review Required status. 3. Click View / Edit to go to the Prior Authorization section. 4. Click View Service Comments to see comments under the New Service Comments section to view the reviewer’s LOI comments. 5. Make updates needed to the plan per the comments by CHFS and submit. | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| Where do I see if a PCSP Service(s) is denied? | <ol style="list-style-type: none"> 1. From the MWMA Dashboard, you will see the Status under Plans of Care section, under Action click Continue on the individual you want to see which service was denied. 2. From the View Plan Details, click Next until you see Service Details. 3. From the Service Details, select the Radio Button for Not Authorized status. 4. Click View / Edit to go to the Prior Authorization section. 5. Click View Service Comments to see comments under the New Service Comments section for the denial comments. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| Where do I upload a document(s) in response to an LOI for PCSP? | <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Tasks, find Revisions Requested by Plan Reviewer task and then click Start. 2. From the Service Details, select the Radio button for each CM Review Required status. 3. Click View / Edit to go to the Prior Authorization section. 4. Click View Service Comments to see comments under the New Service Comments section for the reason LOI was issued. 5. Continue to click next until you come to Upload Documents. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, option #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| What if a PA needs to be extended? | Contact the 1915(c) Waiver Help Desk. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |

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| <p>What will happen if a PA letter is not calculated correctly?</p> | <p>Contact the 1915(c) Waiver Help Desk if a PA letter is not calculated correctly and needs to be updated.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>Prior Authorization (PA) Questions</p> | | |
| <p>I cannot find/have not received the PA letter.</p> | <p>PAs are viewable in KY Health-Net and MWMA; however, MWMA generates a more user-friendly version. PAs can be viewed in MWMA using the Service Details screen or by generating a PA letter.</p> <p>If a provider wants to view PA information using KY Health-Net, instructions are available at https://chfs.ky.gov/agencies/dms/dca/Documents/painquiryinstructions.pdf.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| <p>I do not have a PA letter yet even though services show approved in MWMA.</p> | <p>PAs are viewable in KY Health-Net and MWMA; however, MWMA generates a more user-friendly version. PAs can be viewed in MWMA using the Service Details screen or by generating a PA letter.</p> | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email:</p> |

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| | <p>If a provider wants to view PA information using KY Health-Net, instructions are available at</p> <p>https://chfs.ky.gov/agencies/dms/dca/Documents/painquiryinstructions.pdf.</p> | <p>1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov</p> |
| Patient Liability Questions | | |
| <p>Where do I find how much a participant's patient liability should be?</p> | <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; to access the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. Click on Messages from the kynect Dashboard. 6. From the Message Center, select the notice with the subject of Notice of Eligibility. 7. Click on Please click here to view your message. <p>NOTE: Contact Provider Inquiry Call Center to see Patient Liability in KY Health-Net. Direct Service Providers / Direct Service Provider Supervisor users may not have access to kynect dashboard.</p> | <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For billing inquiries: Provider Inquiry Call Center (800) 807-1232</p> |
| <p>What will happen if patient liability is taken from the incorrect provider?</p> | <p>Patient liability should be taken from the first provider that bills. Contact Provider Inquiry if patient liability is being taken from the incorrect provider.</p> | <p>For billing inquiries: Provider Inquiry Call Center (800) 807-1232</p> |

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| Why does the participant show a patient liability when they should not have an amount? | Contact DCBS to clarify the patient liability amount. | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> |
| MMIS Claims Questions | | |
| My claim was denied due to a POC segment missing or being invalid. | Contact Provider Inquiry if a claim is denied due to a missing or invalid POC segment. | <p>For billing inquiries: Provider Inquiry Call Center (800) 807-1232</p> |
| My claim was denied because of no available income on file. | Check to see if a patient liability segment is present or not for the participant. You may contact DCBS. If DCBS states patient liability is present for the participant, then call Provider Inquiry. | <p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>For billing inquiries: Provider Inquiry Call Center (800) 807-1232</p> |
| I was told to void any paid claims when I submitted a | If you were told to void any paid claims, contact the 1915(c) Waiver Help Desk. NOTE: Please provide the participant ID, provider, date modification was submitted, and PA number of approved service. | <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or</p> |

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| modification for increased services. | | email: 1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov |
| Other Questions | | |
| Participant is in an incorrect benefit plan (Global choices vs. Optimum Choices). | All waiver participants MUST have an active LOC date, patient liability, and a benefit plan. If the waiver participant has each of these and continues to have issues, email the 1915(c) Waiver Help Desk. All benefit plans, including Global, Optimum, and Comprehensive, will work, as long as the participant has a patient liability and active LOC. If the participant plan changes, please check on the LOC dates and patient liability first. If the only issue is with the benefit plan, please email the 1915(c) Waiver Help Desk. | For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email: 1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov |
| Provider number related questions. | Contact the Provider Inquiry for provider number-related questions. | For billing inquiries: Provider Inquiry Call Center (800) 807-1232 |
| Provider number incorrect on PA Letter. | Email the 1915(c) Waiver Help Desk if the provider number is incorrect on the PA letter that was received. Please provide the PA number and the correct provider number. | For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email: 1915(c) HCBS Waiver Help Desk |

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| | | (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov |
| Error code 4422 on POC segment resulting in billing denial. | Email the 1915(c) Waiver Help Desk for a claim being denied for error code 4422. | For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email: 1915(c) HCBS Waiver Help Desk (844) 784-5614, #2-7 1915cWaiverHelpDesk@ky.gov |
| Electronic Visit Verification (EVV) | | Please see the Tellus EVV User Quick Reference Guide – Who to Contact for Tellus EVV Help and Support for more information. |