



**CABINET FOR HEALTH AND FAMILY SERVICES  
DEPARTMENT FOR MEDICAID SERVICES**

**Matthew G. Bevin**  
Governor

275 East Main Street, 6W-A  
Frankfort, KY 40621  
www.chfs.ky.gov

**Adam M. Meier**  
Secretary

**Carol H. Steckel, MPH**  
Commissioner

**TO:** Medicaid Advisory Council (MAC)  
Emily Beauregard, Chair, Consumer Rights and Client Needs TAC

**FROM:** Carol Steckel, Commissioner *Cluck*

**DATE:** March 7, 2019

**RE:** Responses to the Consumer Needs TAC Recommendations Presented during the January 24, 2019  
MAC meeting

In response to recommendations provided by the Consumer Rights and Client Needs TAC, as presented and approved at the January 24, 2019 MAC meeting, the Department for Medicaid Services (DMS) respectfully submits the following:

**Recommendation 2019(01)** – A motion was made, seconded and approved that DMS make accommodations for all TAC and MAC members to be able to fully participate in TAC and MAC meetings including the cost of assistance and interpretation.

**DMS Response** – DMS will, under the guidance of state law, provide for full participation of MAC and TAC members.

**Recommendation 2019(02)** – To clarify Recommendation 2018(86) and DMS' response, a motion was made, seconded and approved that all written communication that a person receives in their requested language also be provided in English for the purpose of consumer assistance.

**DMS Response** – Communication sent to members by DMS is available online in both English and Spanish, i.e., Open Enrollment Packets. If an individual letter goes to a member that is in a language other than English, an English version does not go out because the member has made a specific request for the language of their choice. Letters in another language are sent at the request of the beneficiary. If the beneficiary needs assistance, they may contact DMS for interpretation.

**Recommendation 2019(03)** – To clarify Recommendation 2018(96) and DMS’ response, a motion was made, seconded and approved that all of the medically frail screening questions be asked of the Medicaid applicants and enrollees on the Benefind system or paper application.

**DMS Response** – DMS is currently in the process of making changes in the Benefind system.

**Recommendation 2019(04)** – A motion was made, seconded and approved that the medically frail attestation form specifically include cognitive processes.

**DMS Response** – DMS has included diagnostic codes in the claims analytic tool, and prompts in the Kentucky Medically Frail Medical Condition Guide v5 for Providers that pertain to cognitive impairment. For example:

- B6 Serious impairment in communication or judgment (e.g. sometimes incoherent, acts grossly inappropriately, suicidal preoccupation),
- B8 Major impairment in several areas, such as work or school, family relations, judgment, thinking, or mood (e.g. depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school), in the last six months OR
- B17 Developmental disorder: delayed speech and language, OR
- B18 Intellectual Disabilities, including autism and Rett’s.

**Recommendation 2019(05)** – A motion was made, seconded and approved that the medically frail status display in the Benefind SSP.

**DMS Response** – This has been requested and will be displayed. We do not have a date of when this will be operationalized.

**Recommendation 2019(06)** – A motion was made, seconded and approved that the terms “entity” and “place” be defined in the new copay regulation and policies to ensure that copays are accurately charged for same-day services.

**DMS Response** – The Department has compiled a listing down to the codes of what services would require a copay for same-day services that define the co-pay process for providers..

**Recommendation 2019(07)** – A motion was made, seconded and approved that there be clear communication to any Medicaid recipient who has self-attested as medically frail and/or has had a provider attestation completed, as to whether that attestation has been received, processed and what the final determination is.

**DMS Response** – We have instructed the MCOs to go ahead and process attestation forms received. They are going to send approval letters and requests for information, not denials. Kentucky HealthNet will show the medically frail status in early March.

**Recommendation 2019(08)** – A motion was made, seconded and approved that DMS work with consumers to streamline the grievance and appeals process in the 1915c waivers and 1115 waiver.

**DMS Response** – The 1915(c) redesign efforts will review the grievance and appeals process within the rules and regulations mandated by CMS.