



KanCare 2016

A message to providers and stakeholders regarding long-term care advance payment

You are no doubt aware that the Kansas Department of Health and the Environment (KDHE) has been experiencing delays in processing applications for Medicaid benefits. Until these delays are resolved, KDHE has agreed to issue advance payments to qualified long-term care providers that submit advance payment requests for specific applicants who are awaiting an eligibility determination.

To submit an advanced payment request, the long term care (LTC) facility will use the current status-inquiry process to provide KDHE with a list of their applicants who have a pending determination for Medicaid eligibility.

- The facility will flag each of the applicants for whom they are requesting an advance.
- Only application dates older than 60 days will be considered.
- Priority will be given to smaller facilities versus large, corporate-owned facilities.

Within 15 days KDHE will complete a high-level triage of the applicants to determine their probability of becoming eligible.

KDHE will then calculate the amount of the advance payment. This payment will be paid at 50% of the calculated monthly payment, which is based on the beneficiary's number of days/months in the LTC facility and the LTC daily rate.

KDHE will send a Payment Agreement letter to each LTC provider for signature. This letter will identify the advance payment amount, the option of paper or EFT payment, the terms for repayment and information about the provider (KMAP provider number, TIN number, MCO provider numbers and daily rates) .

When the signed LTC Payment Agreement letter is returned to KDHE, the LTC advance payment will be processed.

Once eligibility is approved and payment starts on behalf of a beneficiary, the advance payments will be collected by the MCOs on claims submitted by the LTC provider for that beneficiary. KDHE will apply all payments associated with the specific beneficiary to the reimbursement of the advance first.

If the applicant is denied eligibility, the agency will request a refund of the advance payment. The refund must be returned within 30 days of the date of the request. If the advance payment is not returned to the agency within 30 days, KDHE will direct the MCOs to collect the advance payment from any current disbursement due to the provider.

