



THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
JESSIE K. RASMUSSEN, DIRECTOR

April 25, 2000

## GENERAL LETTER NO. 14-B(9)-5

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-Related Medicaid and Facility Case Actions*, Title Page, revised; Contents (pages 1 through 4), revised; Contents (pages 5 and 6), new; pages 1 through 95, revised; and pages 96 through 180, new.

### Summary

The chapter has been revised and updated to reflect delinking changes and various policy and system programming changes. The chapter has been restructured into the following sections:

- ◆ Worker-initiated actions that apply to all cases.
- ◆ Facility case actions.
- ◆ Home- and community-based waiver case actions.
- ◆ Medicaid case actions.
- ◆ State Supplementary Assistance case actions.
- ◆ System-initiated case actions.

Some additions to case actions include:

- ◆ Physical disability waiver.
- ◆ Expanded specified low-income Medicare beneficiary (E-SLMB).
- ◆ Home-health specified low-income Medicare beneficiary (HH-SLMB).
- ◆ State Supplementary Assistance for dependent person.
- ◆ State Supplementary Assistance for in-home health care.

### Effective Date

Upon receipt.

## **Material Superseded**

Remove the entire Chapter B(9) from Employees' Manual, Title 14, and destroy it. This includes:

<u>Page</u>	<u>Date</u>
Title Page	October 12, 1993
Contents (page 1)	January 7, 1997
Contents (page 2)	January 19, 1999
Contents (pages 3 and 4)	January 7, 1997
1-6	October 12, 1993
7, 8	January 7, 1997
9-21	October 12, 1993
22, 23	January 7, 1997
24	October 12, 1993
25	January 7, 1997
26-29	October 12, 1993
30	January 7, 1997
31-56	October 12, 1993
57, 58	January 19, 1999
59, 60	October 12, 1993
61, 62	January 19, 1999
63-65	October 12, 1993
66	February 11, 1997
67	January 7, 1997
68, 68a	February 11, 1997
68b	January 7, 1997
68c, 69	February 11, 1997
70, 71	January 7, 1997
72-83	October 12, 1993
84	January 7, 1997
85-89	October 12, 1993
90	January 7, 1997
91-95	October 12, 1993

## **Additional Information**

Refer questions about this general letter to your regional benefit payment administrator.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
JESSIE K. RASMUSSEN, DIRECTOR

April 10, 2001

## GENERAL LETTER NO. 14-B(9)-6

ISSUED BY: Office of Policy Analysis, Division of Policy and Rule Integration

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 3 through 6), revised; Contents (page 7), new; pages 2, 3, 20, 22, 33, 45, 49, 50, 51, 54, 55, 63 through 68, 73, 83, 84, 86, 92, 97 through 103, 137, 139, 144, and 179, revised; pages 92a through 92d, 102a, and 102b; new.

### Summary

The chapter is revised to:

- ◆ Add Medicaid case actions and instructions for the Medicaid for employed people with disabilities (MEPD) program.
- ◆ Include entry of third-party payment for client participation.
- ◆ Generalize the reason code entry for closing a facility program when a client leaves.
- ◆ On page 22, show that an entry is needed in the WVR field when pending a case that has a facility or waiver case aid type.
- ◆ On pages 33, 45, 50, 54, 55, 64, 65, 83, 84, and 144, reference 14-B-Appendix for codes entered in the FAC RSN1 field and clarify that zeros should not be used to block a notice on facility or waiver case aid types. Use of zeros can cause errors in updating the subsystem.
- ◆ On pages 49, 50, and 51, show that an "H" entry reason is used when the facility negative date does not need timely notice.
- ◆ On pages 137 and 139, show that entries are needed to the 1<sup>ST</sup> CP AMT and ONGOING CP fields for family-life home cases.

### Effective Date

Upon receipt.

**Material Superseded**

Remove from Employees' Manual, Title 14, Chapter B(9), Contents (pages 3 through 6), dated April 25, 2000; and pages 2, 3, 20, 22, 33, 45, 49, 50, 51, 54, 55, 63 through 68, 73, 83, 84, 86, 92, 97 through 103, 137, 139, 144, and 179, all dated April 25, 2000, and destroy them.

**Additional Information**

Refer questions about this general letter to your regional benefit payment administrator.



June 5, 2001

GENERAL LETTER NO. 14-B(9)-7

ISSUED BY: Office of Policy Analysis, Division of Policy and Rule Integration

SUBJECT: Employees' Manual, Title 14, Chapter B(9), SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS, Contents (pages 1, 5 and 6), revised; pages 1, 6, 7, 8, 22, 23, 24, 31, 36, 37, 38, 70, 71, 72, 74, 81, 85, 86, 87, 90, 92a, 92b, 114, 115, 116, 123, 124, 132, 133, 135, 136, 138, 139, 143, 145, and 146, revised; and pages 24a, 116a, and 116b, new.

Summary

Material is revised to reflect system changes to the Automated Benefit Calculation system required for TANF data reporting effective May 29, 2001. Revisions are:

- ◆ Addition of a case name identification field, CNID, on the TD01 screen and the instructions for its use.
◆ Addition of new fields CIT and H W B A I N on the TD03 screen and instructions for their use.
◆ Removal of the field ETH from the TD03 screen. Ethnic data is incorporated into H W B A I N fields.
◆ Addition of instructions for newborn children of Medicaid-eligible mothers, on page 114.
◆ Additions and corrections to references.

Effective Date

May 29, 2001

Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

Table with 2 columns: Page, Date. Rows include Contents (page 1), Contents (pages 5 and 6), 1, 6, 7, 8, 22, 23, 24, 31, 36-38, 70-72, 74, 81, 85.

86	April 10, 2001
87, 90	April 25, 2000
92a, 92b	April 10, 2001
114-116, 123, 124, 132, 133, 135, 136, 138	April 25, 2000
139	April 10, 2001
143, 145, and 146	April 25, 2000

**Additional Information**

Refer questions about this general letter to your regional benefit payment administrator.



October 2, 2001

**GENERAL LETTER NO. 14-B(9)-8**

ISSUED BY: Office of Policy Analysis, Division of Policy and Rule Integration

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 4 and 5), revised; pages 52, 56, 64, 86, 92, 92a, 92b, 92c, 96, 97, 98, 115, 126, 130, 141, 143, 155, 156, 161, and 173, revised; and page 64a, new.

**Summary**

This chapter is revised to:

- ◆ Change the “considered person” FUND code for State Supplementary Assistance in-home health-related care. The correct FUND code is “S.”
- ◆ Change the instructions for “Changing Client Participation” to note the action necessary when a later positive or negative date is on the facility system.
- ◆ Change the instructions for “Changing Level of Care” to remove the reference to “Changes of Level of Care in the Same Facility.”
- ◆ Correct cross-references.
- ◆ Change the instructions for “Move: Same Day” to note the action necessary when a later positive or negative date is on the facility system.

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (p. 4)	April 10, 2001
Contents (p. 5)	June 5, 2001
52, 56	April 25, 2000
64	April 10, 2001
86	June 5, 2001

92	April 10, 2001
92a, 92b	June 5, 2001
92c	April 10, 2001
96	April 25, 2000
97, 98	April 10, 2001
115	June 5, 2001
126, 130, 141	April 25, 2000
143	June 5, 2001
155, 156, 161, 173	April 25, 2000

**Additional Information**

Refer questions about this general letter to your regional benefit payment administrator.





July 23, 2002

**GENERAL LETTER NO. 14-B(9)-9**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 1, 5, and 6), revised; pages 3 through 6, 9, 19 through 24, 31, 32, 36, 52, 64, 70, 72, 74, 75, 77, 81, 83 through 86, 90, 97, 98, 102, 103, 104, 116, 116a, 123, 132 through 136, 139, 143, 145, 146, and 179, revised; and pages 98a and 136a, new.

**Summary**

This chapter is revised to:

- ◆ Add reference for the new TD00 menu option, MEPC=MEPD Premium Change.
- ◆ Remove the section on AID Type Choice and the cross-references from the chapter.
- ◆ Change references for the Department's organizational areas and names to match the restructuring.
- ◆ Change instructions for the Medicaid for employed people with disabilities (MEPD) to match system changes based on the new MEPC=MEPD Premium Change system.
- ◆ Change instructions for home- and community-based waivers to reflect system changes.

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	June 5, 2001
Contents (page 5)	October 2, 2001
Contents (page 6)	June 5, 2001
3	April 10, 2001
4, 5	April 25, 2000
6	June 5, 2001

9, 19	April 25, 2000
20	April 10, 2001
21	April 25, 2000
22, 23, 24, 31	June 5, 2001
32	April 25, 2000
36	June 5, 2001
52, 64, 64a	October 2, 2001
70, 72, 74	June 5, 2001
75, 77	April 25, 2000
81	June 5, 2001
83, 84	April 10, 2001
85	June 5, 2001
86	October 2, 2001
90	June 5, 2001
97	October 2, 2001
98, 102, 103	April 10, 2001
104	April 25, 2000
116, 116a, 123, 132, 133	June 5, 2001
134	April 25, 2000
135, 136, 139	June 5, 2001
143	October 2, 2001
145, 146	June 5, 2001
179	April 10, 2001

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
JESSIE K. RASMUSSEN, DIRECTOR

September 24, 2002

## **GENERAL LETTER NO. 14-B(9)-10**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, page 20, revised.

### **Summary**

This chapter is revised to clarify the instructions for transferring cases to county offices that are open less than full-time.

### **Effective Date**

Upon receipt.

### **Material Superseded**

Remove the page 20, dated July 23, 2002, from Employees' Manual, Title 14, Chapter B(9), and destroy it:

### **Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
JESSIE K. RASMUSSEN, DIRECTOR

February 25, 2003

## GENERAL LETTER NO. 14-B(9)-11

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 1), revised; and pages 21 through 24, 31, 36, 70, 71, 74, 81, 82, 85, 86, 90, 92, 92a through 92d, 116, 116a, 123, 132, 136a, 139, 143, and 146, revised.

### Summary

This chapter is revised to:

- ◆ Change the instructions for the TD01 CO RES field to indicate that worker entry is required. The system no longer defaults to the county of the worker number if no entry is made.
- ◆ Remove the incorrect note from the case actions, "Reviews," about "73-3" aid types not generating a review due date.
- ◆ Change instructions for the Medicaid for employed people with disabilities (MEPD) to note that only one person is to be on a case for MEPD. If the household consists of more than one recipient, create a separate case number for each individual to ensure that the case is handled correctly in the MEPD billing system.

### Effective Date

Upon receipt.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (p. 1)	July 23, 2002
21-24, 31, 36, 70	July 23, 2002
71	July 5, 2001
74, 81	July 23, 2002
82	April 25, 2000
85, 86, 90	July 23, 2002

92, 92a, 92b, 92c, 92d  
116, 116a, 123, 132, 136a, 139, 143, 146

October 2, 2001  
July 23, 2002

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

May 20, 2003

## GENERAL LETTER NO. 14-B(9)-12

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 1, 2 and 5), revised; and pages 11, 12, 13, 14, 22, 23, 26, 27, 33 through 39, 44, 57, 64, 71, 72, 81, 82, 92c, 92d, 106, 109, 110, and 111, revised; and page 72a, new.

### Summary

This chapter is revised to:

- ◆ Add the case actions on "Failure to Cooperate With HIPP" to the section "ALL CASES WORKER-INITIATED ACTIONS" and correct an error on the Table of Contents.
- ◆ Add the new PF06 = HIPP REF function key to the TD03 screen. This allows the worker to make an automated referral to the HIPP Referral (HIRF) system.
- ◆ Add language to require entry of the county responsible for the state's share of medical costs when the client is in in ICF/MR or the MR or BI waiver.
- ◆ Correct "Bureau of Health Care Purchasing and Quality Assurance" to "Office of Field Support" and to clarify the correct reason code to be used when entering a vendor number due to change of ownership.
- ◆ Add that the VA aid and attendance code is "D."
- ◆ Clarify that notice reason code "000" can be entered in RSN2 field when denying facility or waiver when the worker issued a manual notice.
- ◆ Remove references and sections on the home-health specified low-income Medicare beneficiary group (HH-SLMB). The federally funded program was terminated effective December 31, 2002.
- ◆ Add an omitted screen field and instructions under "Denying an Application for Home- and Community-Based Waiver."

### Effective Date

Upon receipt.

### **Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	February 25, 2003
Contents (page 2)	April 25, 2000
Contents (page 5)	July 23, 2002
11-14	April 25, 2000
22, 23	February 25, 2003
26, 27	April 25, 2000
33	April 10, 2001
34, 35	April 25, 2000
36	February 25, 2003
37, 38	June 5, 2001
39, 44, 57	April 25, 2000
64	July 23, 2002
71	February 25, 2003
72	July 23, 2002
81, 82, 92c, 92d	February 25, 2003
106, 109-112	April 25, 2002

### **Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

July 8, 2003

## GENERAL LETTER NO. 14-B(9)-13

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 51, 77, and 177, revised.

### Summary

Pages 51 and 177 are revised to correct the instructions to entries in the NEG DT field on facility and waiver cases. Facilities are not paid for the last day so workers need to enter the day following the last day the facility should receive payment.

Page 77 is revised to indicate that although medical entries will roll from the TD05 screen to the TD03 screens, the waiver status entry on the TD05 screen does not roll to the TD03 screens. TD03 entries are needed on waiver aid type cases even when the case was pended prior to approval.

### Effective Date

Upon receipt.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
51	April 10, 2001
77	July 23, 2002
177	April 25, 2000

### Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.





March 16, 2004

**GENERAL LETTER NO. 14-B(9)-14**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 5), revised; and pages 5, 9, 10, 24 through 33, 37 through 40, 44, 45, 46, 52 through 58, 82, 92d, 93 through 98, 98a, 99, 124, 140, 142, 155, 167, 171, 172, and 173, revised; page 98b, new.

**Summary**

This chapter is revised to:

- ◆ Change the "Food Stamps" references to "Food Assistance."
- ◆ Update the information contained in the note under the section, "FACILITY CASE ACTIONS: Approving an Application," to reflect the current system.
- ◆ Add sections on denying and canceling Medicaid when SSA determines the person is not disabled.
- ◆ Changing organizational names to match the Department's current structure.
- ◆ Update the instructions under the section, "MEDICAID CASE ACTIONS: Prior Eligibility Only (No Ongoing Eligibility)."
- ◆ Change the MED ENTRY RSN code under the section, "Change to MEPD Premium," from "G" or "H," to "R."

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 5)	May 20, 2003
5, 9	July 23, 2002
10	April 25, 2000

24	February 25, 2003
24a	June 5, 2001
25	April 25, 2000
26, 27	May 20, 2003
28-30	April 25, 2000
31	February 25, 2003
32	July 23, 2002
33, 37	May 20, 2003
38-40	April 25, 2000
44	May 20, 2003
45	April 10, 2001
46, 52	July 23, 2002
53	April 25, 2000
54, 55	April 10, 2001
56	October 2, 2001
57	May 20, 2003
58	April 25, 2000
82, 92d	May 20, 2003
93-95	April 25, 2000
96	October 2, 2001
97, 98, 98a	July 23, 2002
99	April 10, 2001
124	June 5, 2001
140, 142	April 25, 2000
155	October 2, 2001
167, 171, 172	April 25, 2000
173	October 2, 2001

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

April 13, 2004

## **GENERAL LETTER NO. 14-B(9)-15**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, page 93, revised.

### **Summary**

This chapter is revised to correct the screen fields used under the section for the Medicaid case actions on denying an application due to a Social Security Administration decision denying disability.

### **Effective Date**

Immediately.

### **Material Superseded**

Remove from Employees' Manual, Title 14, Chapter B(9), page 93, dated March 16, 2004, and destroy it.

### **Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

May 25, 2004

## GENERAL LETTER NO. 14-B(9)-16

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 3, 9, 24, 38, 70, and 74, revised.

### Summary

This chapter is revised to:

- ◆ Change instructions for home- and community-based waivers to allow for a waiver case and an RCF case to be opened at the same time. This change is effective May 1, 2004.
- ◆ Remove the instructions to wait two to three working days after closing a facility case before opening the waiver case. Actions entered in ABC system are passed to the facility and waiver systems on the following day.
- ◆ Correct cross-references.

### Effective Date

Upon receipt.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
3	July 23, 2002
9, 24, 38	March 16, 2004
70, 74	February 23, 2003

### Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

November 5, 2004

## GENERAL LETTER NO. 14-B(9)-17

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID CASE ACTIONS*, Contents (pages 1 through 7), revised; and pages 14, 19, 20, 21, 23, 24, 31, 37, 38, 44, 49, 55, 56, 57, 58, 63, 72a, 73, 74, 86, 92c, 95, 96, 98b, 115, and 177 through 180, revised; and pages 14a, 20a, 20b, 20c, 58a, 58b, 86a, and 181, new.

### Summary

This chapter is revised to:

- ◆ Change instructions for "Canceling Individuals."
- ◆ Add a new section, "Excluded Persons."
- ◆ Add a new section, "Sanctions," that includes the following changed or new subsections:
  - "Add Sanction on a Case"
  - "Failure to Comply with Third Party Liability"
  - "Failure to Cooperate with HIPP"
  - "Failure to Cooperate with Child Support"
  - "Failure to Cooperate with Investigations"
  - "Failure to Cooperate with Quality Control"
- ◆ Change instructions for pending a case.
- ◆ Change instructions for newborn children of Medicaid-eligible mothers.
- ◆ Removal of references to the SSRD screen.
- ◆ Add instructions for the implementation of the Individualize Services Information System for facilities (ISIS).
- ◆ Add a new section, "Supplement for Medicare and Medicaid Eligibles," under "Closing State Supplementary Assistance."

### Effective Date

Upon receipt.

### **Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pp. 1 and 2)	May 20, 2003
Contents (p. 3)	April 10, 2001
Contents (p. 4)	October 2, 2001
Contents (p. 5)	March 16, 2004
Contents (p. 6)	July 23, 2002
Contents (p. 7)	April 10, 2001
14	May 20, 2003
19	July 23, 2002
20	September 24, 2003
21	February 25, 2003
23	May 20, 2003
24	May 25, 2004
31, 37	March 16, 2004
38	May 25, 2004
44	March 16, 2004
49	April 10, 2001
55-58	March 16, 2004
63	April 10, 2001
72a	May 20, 2003
73	April 10, 2001
74	May 25, 2004
86	February 25, 2003
92c	May 20, 2003
95	March 15, 2004
96, 98b	March 16, 2004
115	October 2, 2001
177	July 8, 2003
178	April 25, 2000
179	July 23, 2002
180	April 25, 2000

### **Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



January 14, 2005

**GENERAL LETTER NO. 14-B(9)-18**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 53, 92c, 92d, 102, 102a, 102b, 103, 104, and 115, revised.

**Summary**

This chapter is revised to:

- ◆ Remove a note from TD05 FAC POS DT field under the facility case actions section, **Changing Client Participation: Automated.**
- ◆ Add screen fields RSCM BENEFIT MONTH and RSCM CASH ON HAND and language for the case actions relating to Medicaid for employed people with disabilities under:
  - **Approving an Application.**
  - **Reinstatement.**
  - **Reopening Medicaid: Reopening Due to Payment of MEPD Premium.**
- ◆ Correct a cross-reference.
- ◆ Change language under the case actions relating to newborn children of Medicaid-eligible mothers and add a cross-reference to 14-B(7), **Newborn Children of Medicaid-Eligible Mothers.**

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
53	March 16, 2004
92c	May 20, 2003
92d	March 16, 2004

102	July 23, 2002
102 a, 102b	April 10, 2001
103, 104	July 23, 2002
115	November 5, 2004

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.





# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

February 4, 2005

## GENERAL LETTER NO. 14-B(9)-19

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 3), revised; and pages 54 and 55, revised.

### Summary

This chapter is revised to correct the placement of an action for changing client participation manually.

### Effective Date

Upon receipt.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 3)	November 5, 2004
54	March 16, 2004
55	November 5, 2004

### Additional Information

Refer questions about this general letter to your area income maintenance supervisor 2.



March 18, 2005

**GENERAL LETTER NO. 14-B(9)-20**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 1 through 6), revised; pages 5 through 9, 15, 70, and 73, revised.

**Summary**

This chapter is revised to:

- ◆ Add language to indicate not to pend or approve HCBS waiver services on a Food Assistance case. Separate case numbers are now required.
- ◆ Correct the instructions for approval of medical transportation.

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pp. 1 and 2)	November 5, 2004
Contents (p. 3)	February 4, 2005
Contents (pp. 4-7)	November 5, 2004
5	March 16, 2004
6	July 23, 2002
7,8	June 5, 2001
9	May 25, 2004
10	March 16, 2004
15	April 25, 2002
70	May 25, 2004
73	November 5, 2004

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

April 29, 2005

## GENERAL LETTER NO. 14-B(9)-21

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 5 and 6), revised; pages 1, 3, 20b, 20c, 31, 44, 56, 58, 58a, 58b, 70, 74, 86, 132 through 136, 136a, 164, and 165, revised; and pages 136b through 136f, new.

### Summary

This chapter is revised to:

- ◆ Add language to the section, "Other Resources Available," to reflect the Internet access to Vehicle Registration & Titling (VRT) screens.
- ◆ Add the new religious beliefs (RB) indicator field and instructions to screens TD03 and ST01. The RB field is to be entered when a person's social security number is all zeros.
- ◆ Change the language to match other case action chapters for the section, "State ID Numbers."
- ◆ Change the name of form 470-3924, *Request for Medicaid Eligibility Data Changes and Verification*, to *Request for ISIS Changes*.
- ◆ Remove language under home- and community-based waiver case actions that advised waiting until a day after closing a medical facility before opening a waiver case. With ISIS, a delay is no longer required.
- ◆ Add a new section, "Residential Case Facility" under "Approving an Application: Automated."
- ◆ Add language to the section, "Approving an Application: Dependent Person."
- ◆ Add specific instructions for the recipient and for the dependent under the section, "Approving an Application: Dependent Person on an Active Medicaid Case."

### Effective Date

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (pages 5 and 6)	March 18, 2005
1	June 5, 2001
3	May 25, 2004
20b, 20c, 31, 44, 56, 58, 58a, 58b	November 5, 2004
70	March 18, 2005
74, 86	November 5, 2004
132	February 25, 2003
133-136	July 23, 2002
136a	February 25, 2003
164, 165	April 25, 2000

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

June 24, 2005

## GENERAL LETTER NO. 14-B(9)-22

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 3, 5 and 6) revised; pages 52, 74, 83, 84, 99, and 177 through 181, revised; and pages 52a, 84a, and 182, new.

### Summary

This chapter is revised to:

- ◆ Change the language for instructions under the following sections:
  - "FACILITY CASE ACTIONS: Closing a Program: Death"
  - "HOME-AND COMMUNITY-BASED WAIVER: Closing Waiver: Death"
  - "MEDICAID CASE ACTIONS: Canceling Ongoing Eligibility: Due to Death"
- ◆ Add the following new subsections under the section, "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Closing the Program."
  - "Recording Death on a Dependent Person Case"
  - "Closing Case due to Death of Recipient"
  - "Closing a Supplement for Medicare and Medicaid Eligibles"
- ◆ Lower the income limit for the Supplement for Medicare and Medicaid Eligibles from 135% of the federal poverty level to 120%.

### Effective Date

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 3)	March 18, 2005
Contents (pages 5 and 6)	April 29, 2005
52	March 16, 2004
74	April 29, 2005
83, 84	July 23, 2002
99	March 16, 2004
177-181	November 5, 2004

**Additional Information**

Refer questions about this general letter to your area income maintenance supervisor 2.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

December 30, 2005

## GENERAL LETTER NO. 14-B(9)-23

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 4), revised; and pages 72a, 78, 98b, 141, and 142, revised.

### Summary

This chapter is revised to:

- ◆ Add the Children's Mental Health Waiver as a section under "HOME-AND COMMUNITY-BASED WAIVER CASE ACTIONS."
- ◆ Add fields and instructions to the "Approving an Application: In-Home Health-Related Care."
- ◆ Remove a note that is no longer valid under the section, "MEDICAID CASE ACTIONS: Canceling Ongoing Eligibility: Program."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 4)	March 18, 2005
72a	November 5, 2004
78	April 25, 2000
98b	November 5, 2004
141	October 2, 2001
142	March 16, 2004

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



February 17, 2006

GENERAL LETTER NO. 14-B(9)-24

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS, Contents (page 2), revised; pages 1, 2, 17, 18, 38, 75, 77, 78, 83, 84, 84a, and 103, revised; page 18a, new.

Summary

This chapter is revised to:

- ◆ Add the new TD03 DSTR field to the list of demographic information.
◆ Add specific screen fields and instructions for MEPD cases under the section, "Medical Transportation: Denial."
◆ Correct the TD03 WVR application code for physical disabilities from "D" to the correct code of "P."
◆ Change fields and instructions under the section, "HOME- AND COMMUNITY-BASED WAIVER CASE ACTIONS: Closing Waiver."
◆ Add a field and instructions under the section, "MEDICAID CASE ACTIONS: Reopening Medicaid: Reopening Due to Payment of MEPD Premium."

Effective Date

Immediately.

Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

Table with 2 columns: Page, Date. Rows include Contents (page 2), 1, 2, 17, 18 with corresponding dates from March 18, 2005 to April 25, 2000.



38	November 5, 2004
75	July 23, 2002
77	July 8, 2003
78	December 30, 2005
83, 84, 84a	June 24, 2005
103	January 14, 2005

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



March 31, 2006

**GENERAL LETTER NO. 14-B(9)-25**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 1, 125 through 132, 157, 158, 163, and 164, revised.

**Summary**

This chapter is revised to:

- ◆ Change names of some fields on TD03 to reflect the current system.
- ◆ Add language under the "In-Home Health-Related Care" sections of State Supplementary Assistance case actions to indicate that the worker should not enter the home maintenance allowance, since the system automatically subtracts this allowance from the income.

**Effective Date**

Upon receipt.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
1	February 17, 2006
125	April 25, 2000
126	October 2, 2001
127-129	April 25, 2000
130	October 2, 2001
131	April 25, 2000
132	April 29, 2005
157, 158, 163	April 25, 2000
164	April 29, 2005

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

April 21, 2006

## GENERAL LETTER NO. 14-B(9)-26

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 5 and 6, revised.

### Summary

This chapter is revised to change the language in the section, "Case Numbering." Effective February 23, 2006, the ABC system no longer deletes case numbers that have been canceled or denied for all programs for two years.

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
5, 6	March 18, 2005

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

August 18, 2006

## GENERAL LETTER NO. 14-B(9)-27

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 1, 2, 3, and 5), revised; pages 1, 2, 5 through 8, 24, 26, 27, 28, 33 through 41, 46, 47, 48, 64, 72, 77, 78, 79, 81, 85, 87, 88, 91, 92d, 95, 96, 98b, 102a, 102b, 105 through 121, 125, 126, 128, 129, 130, 134, 136c through 136f, 137 through 143, 145, 146, 149, 150, 151, 159, 161, 164 through 169, 171, 172, 173, 175, and 176, revised; and page 64a, new.

### Summary

This chapter is revised to:

- ◆ Add a new section, "Assigning Medicaid Review Due Dates." With the automation now complete for the form 470-3118, *Medicaid Review*, instructions are being added on both when the system generates the form and on how to request an "on-demand" form.
- ◆ Add a new section, "Issuing Additional Personal Needs Allowance."
- ◆ Add the new US and ID fields, to the list of demographic information that may need to be checked for making entries on the TD03 screen. These fields are used to indicate that citizenship and identity have been verified.
- ◆ Change language under the section, "Case Numbering," to indicate that an FBU of 17 is not to be used. The FBU of 17 is to be used for the Medicaid for Independent Young Adults (MIYA) cases.
- ◆ Add language and the TD05 FLH field to the appropriate case actions sections. This addition is for cases in aid types of 131 and 631 and is used to entry additional personal needs allowance for clients with income of less than \$50 per month.
- ◆ Change field names and locations to reflect the current system throughout the entire chapter.
- ◆ Add the screen field TD05 HH SIZE to the section, "Reviews for MEPD Six-Month Premium Period and Annual Review."

### Effective Date

Immediately.

## Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 1)	March 18, 2005
Contents (page 2)	February 17, 2006
Contents (pages 3 and 5)	June 24, 2005
1	March 31, 2006
2	February 17, 2006
5	April 21, 2006
6	July 23, 2002
7	April 21, 2006
8	March 18, 2005
24	November 5, 2004
26-28, 33	March 16, 2004
34, 35, 36	May 20, 2003
37	November 5, 2004
38	February 17, 2006
39, 40	March 16, 2004
41	April 25, 2000
46	March 16, 2004
47, 48	April 25, 2000
64, 72	May 20, 2003
77, 78	February 17, 2006
79	April 25, 2000
81	May 20, 2003
85	February 25, 2003
87	June 5, 2001
88, 91	April 25, 2000
92d	January 14, 2005
95, 96	November 5, 2004
98b	December 30, 2005
102a, 102b	January 14, 2005
105	April 25, 2000
106	May 20, 2003
107, 108	April 25, 2000
109-111	May 20, 2003
113	April 25, 2000
114	June 5, 2001
115	January 14, 2005
116, 116a	February 25, 2003
116b	June 5, 2001
117-121	April 25, 2000
125, 126, 128, 129	March 31, 2006

130	March 31, 2006
134, 136c-136f	April 29, 2005
137	April 10, 2001
138	June 5, 2001
139	February 25, 2003
140	March 16, 2004
141, 142	December 30, 2005
143	February 25, 2003
145	July 23, 2002
146	February 25, 2003
149-151, 159	April 25, 2000
161	October 2, 2001
164	March 31, 2006
165	April 29, 2005
166	April 25, 2000
167	March 16, 2004
168, 169	April 25, 2000
171-173	March 16, 2004
175, 176	April 25, 2000

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

September 29, 2006

## GENERAL LETTER NO. 14-B(9)-28

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 2, 3, and 64, revised.

### Summary

This chapter is revised to:

- ◆ Remove the reference to the State Child Care Assistance system through the option SCCA=CCA under the section, "Other Resources Available." This option is no longer available due to system changes.
- ◆ Remove the reference to the Department of Transportation's vehicle registration records by the option of AUTO = Motor Vehicle Resources under the section, "Other Resources Available." This option is no longer available due to system changes.
- ◆ Remove a field and instructions under the section, "FACILITY CASE ACTIONS: Issuing Additional Personal Needs Allowance for Past and Current Month."

### Effective Date

Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
2	August 18, 2006
3	April 29, 2005
64	August 18, 2006

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

THOMAS J. VILSACK, GOVERNOR  
SALLY J. PEDERSON, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

December 22, 2006

## GENERAL LETTER NO. 14-B(9)-29

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 5 through 8, 18, 18a, 26, 28 through 31, 33, 39, 42 through 46, 77 through 84, 86, 89, 90, 92c, 92d, 98a, 98b, 100, 118 through 134, 135, 150, 151, 152, and 153 through 162, revised; and pages 134a and 152a, new.

### Summary

This chapter is revised to:

- ◆ Add aid type 73-1 to the list of aid types that may need to have an additional \$20 personal needs allowance issued.
- ◆ Add the new THRU MO field and instructions to applicable BCW1 and BCW2 case actions. This field allows the option to create multiple identical income transactions.
- ◆ Add language to the field instructions under the section, "Redetermination."
- ◆ Add instructions to check the TD03 WVR code when closing a waiver case that no longer meets waiver requirements.
- ◆ Add TD05 HH SIZE field and instructions to the section, "MEDICAID CASE ACTIONS: Approving an Application: Medicaid for Employed People with Disabilities."
- ◆ Change language in the section, "MEDICAID CASE ACTIONS: Reviews for Medicaid: Reviews for MEPD Six-Month Premium Period and Annual Reviews."
- ◆ Change the BCW2 P DED NEED field amount from \$60 to \$40 for the additional personal needs allowance for veterans with improved pensions that have been reduced to \$90 in the following sections:
  - "FACILITY CASE ACTIONS: Approving an Application: Automated;" and
  - "FACILITY CASE ACTIONS: Reopening Case: Automated."
- ◆ Correcting the amount of the resource limit for MEPD when approving an application.

### Effective Date

Immediately.



## Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
5-8	August 18, 2006
18, 18a	February 17, 2006
26, 28	August 18, 2006
29, 30	March 16, 2004
31	April 29, 2005
33, 39	August 18, 2006
42, 43	April 25, 2000
44	April 29, 2005
45	March 16, 2004
46, 77-79	August 18, 2006
80	April 25, 2000
81	August 18, 2006
82	March 16, 2004
83, 84	February 17, 2006
86	April 29, 2005
89	April 25, 2000
90	February 25, 2003
92c	January 14, 2005
92d	August 18, 2006
98a	March 16, 2004
98b	August 18, 2006
100	April 10, 2001
118-121	August 18, 2006
122	April 25, 2000
123	February 25, 2003
124	March 16, 2004
125, 126	August 18, 2006
127	March 31, 2006
128-130	August 18, 2006
131, 132	March 31, 2006
133	April 29, 2005
134	August 18, 2006
135, 136	April 29, 2005
150, 151	August 18, 2006
152	August 25, 2000
153, 154	April 25, 2000
155	March 16, 2004
156	October 2, 2001
157, 158	March 31, 2006
159	August 18, 2006

160	April 25, 2000
161	August 18, 2006
162	April 25, 2000

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



February 23, 2007

**GENERAL LETTER NO. 14-B(9)-30**

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 5), revised; pages 2, 3, 52a, 92, 92d, 93, 97, 98, 98a, and 98b, revised.

**Summary**

This chapter is revised to:

- ◆ Remove the reference to the state warrant system and the option "WRNT=Warrant." Effective January 1, 2007, this option is no longer available.
- ◆ Change language and add a field to clarify the section, "MEDICAID CASE ACTIONS: Approving an Application: Medicaid for Employed People with Disabilities (MEPD)."
- ◆ Change language under the section, "MEDICAID CASE ACTIONS: Change to MEPD Premium."
- ◆ Update instructions relating to the Field Operations Support Unit.

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 5)	August 18, 2006
2, 3	September 29, 2006
52a	June 24, 2005
92	February 25, 2003
92d	December 22, 2006
93	April 13, 2004
97, 98, 98a	March 16, 2004
98b	June 24, 2005

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

April 6, 2007

## GENERAL LETTER NO. 14-B(9)-31

ISSUED BY: Office of Policy Analysis

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 16, 17, and 77, revised.

### Summary

This chapter is revised to:

- ◆ Add the TD06 FED ADT field and instructions to the section, "Medical Transportation: Approval."
- ◆ Change the instructions for the TD03 ENTRY RSN field under the section, "HOME-AND COMMUNITY -BASED WAIVER CASE ACTIONS: Approving or Reopening an Application."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
16	April 25, 2000
17	February 17, 2006
77	December 22, 2006

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

May 25, 2007

## GENERAL LETTER NO. 14-B(9)-32

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 26, 31, 43, 44, 59, 60, and 64a, revised.

### Summary

This chapter is revised to add cross-references under the TD05 VENDOR field instructions to the new INPI screen in Title 14, Chapter B(4), "INPI Screen."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
26, 31, 43, 44	December 22, 2006
59, 60	April 25, 2000
64a	August 18, 2006

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



September 14, 2007

**GENERAL LETTER NO. 14-B(9)-33**

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 3), revised; and pages 30, 38, 43, 44, 52, 75, 92d, and 93, revised.

**Summary**

This chapter is revised to:

- ◆ Add language to the field instructions in the section, "Approving an Application: Automated."
- ◆ Remove references to MMIS. IM workers no longer have access to the MMIS system.
- ◆ Add language to the TD03 POV field instructions under the section, "Medicaid for Employed People with Disabilities (MEPD)."

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (p. 3)	August 18, 2006
30	December 22, 2006
38	August 18, 2006
43, 44	May 25, 2007
52	June 24, 2005
52a	February 23, 2007
75	February 17, 2006
92d, 93	February 23, 2007

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



November 9, 2007

**GENERAL LETTER NO. 14-B(9)-34**

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 5), revised; and pages 5, 6, 52, 98b, 125, and 141, revised.

**Summary**

This chapter is revised to:

- ◆ Remove the note relating to six-month reviews for MEPD from the section, "Assigning Medicaid Review Due Dates."
- ◆ Remove the incorrect fields and instructions under the facility case actions section, "Closing a Program: Death."
- ◆ Rename the section "Reviews for MEPD Six-Month Premium Period and Annual Review" as "MEPD Annual Review." The change reflects the MEPD policy change going from six-month reviews to an annual review. References to a six-month review for MEPD have been changed to annual reviews.
- ◆ Change language under the State Supplementary Assistance case actions section, "Approving an Application: In-Home Health-Related Care," for clarification.

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 5)	February 23, 2007
5, 6	December 22, 2006
52	September 14, 2007



98b  
125  
141

February 23, 2007  
December 22, 2006  
August 18, 2006

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



February 8, 2008

GENERAL LETTER NO. 14-B(9)-35

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS, Contents (pages 1, 4, 5, and 6), revised; and pages 17, 24 through 28, 31 through 34, 38, 44, 45, 46, 75, 76, 77, 86a, 87, 92b, 92c, 92d, 93 through 98, 98a, 98b, 104, 105, 107 through 112, 115, 116, 120, 121, 122, 124, 125, 129, 130, 133, 134, 134a, 136b through 136f, 137 through 148, 152, 152a, and 164 through 174, revised; and pages 136g, 136h, and 174a, new.

Summary

This chapter is revised to:

- ◆ Add instructions for the new AD, "Application Detail," field located on the TD05 screen for medical, facility, and State Supplementary Assistance actions throughout the entire chapter.
◆ Change the language under the section, "MEDICAID CASE ACTIONS: Approving an Application: Medicaid for Employed People with Disabilities."
◆ Change the form name from Medicaid Information Questionnaire for SSI Persons to SSI Medicaid Information, change the form number from 470-2304 to 470-0364, and add the form number of the Spanish version.
◆ Add subsections under the section, "MEDICAID CASE ACTIONS: Change to MEPD Premium," to provide instructions on how to decrease or increase MEPD premiums.

Effective Date

Immediately.

Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

Table with 2 columns: Page, Date. Rows: Contents (page 1) August 18, 2006; Contents (page 4) December 30, 2005; Contents (page 5) November 9, 2007

Contents (page 6)	June 24, 2005
17	April 6, 2007
24	August 18, 2006
25	March 16, 2004
26	May 25, 2007
27	August 18, 2006
28	December 22, 2006
31	May 25, 2007
32	March 16, 2004
33	December 22, 2006
34	August 18, 2006
38, 44	September 14, 2007
45, 46	December 22, 2006
75	September 14, 2007
76	April 25, 2000
77	April 6, 2007
86a	November 5, 2004
87	August 18, 2006
92b	February 25, 2003
92c	December 22, 2006
92d	September 14, 2007
93	September 7, 2007
94	March 16, 2004
95, 96	August 18, 2006
97, 98, 98a	February 23, 2007
98b	November 9, 2007
104	January 14, 2005
105, 107-112, 115, 116	August 18, 2006
120-122, 124,	December 22, 2006
125	November 9, 2007
129-130, 133, 134, 134a	December 22, 2006
136b	April 29, 2005
136c-136f, 137-140	August 18, 2006
141	November 9, 2007
142, 143	August 18, 2006
144	April 10, 2001
145, 146	August 18, 2006
147, 148	April 25, 2000
152, 152a	December 22, 2006
164-169	August 18, 2006
170	April 25, 2000
171-173	August 18, 2000
174	April 25, 2000

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

February 29, 2008

## GENERAL LETTER NO. 14-B(9)-36

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 5), revised; pages 98a and 98b, revised; and pages 98c and 98d, new.

### Summary

This chapter is revised to add a new subsection, "Using MEPC," for clarity under the section, "MEDICAID CASE ACTIONS: Change to MEPD Premium."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 5)	February 8, 2008
98a, 98b	February 8, 2008

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

April 18, 2008

## GENERAL LETTER NO. 14-B(9)-37

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 5), revised; and pages 98a through 98c, 99, and 100, revised.

### Summary

This chapter is revised to remove the section, "MEDICAID CASE ACTIONS: Change to MEPD Premium: Increase." The Automated Benefit Calculation (ABC) system does not act on worker entries to increase premiums that are generated from the TD05 screen.

Use the section, "MEDICAID CASE ACTIONS: Change to MEPD Premium: Using MEPC," for instructions for increasing or decreasing the premium for the current month or a prior month.

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 5)	February 29, 2008
98a-98d	February 29, 2008
99	June 24, 2005
100	December 22, 2006

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

July 4, 2008

## GENERAL LETTER NO. 14-B(9)-38

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 15, 114, 164, 165, and 175, revised.

### Summary

This chapter is revised to:

- ◆ Change the EFFECT DT field instructions on the TD06 screen under the section, "ALL CASES WORKER-INITIATED ACTIONS: Medical Transportation: Approval," to require entry of the earliest month of service instead of the most recent month. This change in language provides consistency between programs on dealing with medical transportation approvals.
- ◆ Add the LAST REV field on the TD05 screen and instructions under the section, "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Pending an Application," and revise the instructions for the MED ENTRY RSN field on TD05 to reflect current system coding.
- ◆ Correct the FUND code entries on the TD03 screen under the section, "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Reopening a Case: Dependent Person," to separate the codes used on the client's line and those used on the dependent's line.
- ◆ Change the OHP field instructions on the TD03 screen under the section, "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Reopening a Case: Residential Care Facility." to require code "R" for residential care facility instead of codes "F" or "G."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
15	March 18, 2005
114	August 18, 2006
164, 165	February 8, 2008
175	August 18, 2006

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



July 18, 2008

**GENERAL LETTER NO. 14-B(9)-39**

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 52, 84a, 100, 177, and 178, revised.

**Summary**

This chapter is revised to add instructions for the option of doing an automated estate recovery referral using the function key F6 on the TD05 and TD03 screens. The instructions are added under the following sections:

- ◆ "FACILITY CASE ACTIONS: Closing a Program: Death"
- ◆ "MEDICAID CASE ACTIONS: Closing Waiver: Death"
- ◆ "MEDICAID CASE ACTIONS: Canceling Ongoing Eligibility: Due to Death"
- ◆ "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Closing the Program: Recording Death on a Dependent Person Case"
- ◆ "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Closing the Program: Closing Case due to Death of Recipient"

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
52	November 9, 2007
84a	February 17, 2006
100	April 18, 2008
177, 178	June 24, 2005

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.





# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
KEVIN W. CONCANNON, DIRECTOR

August 29, 2008

## GENERAL LETTER NO. 14-B(9)-40

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 79, 80, and 81, revised.

### Summary

This chapter is revised to add system changes under the section, "HOME-AND COMMUNITY-BASED WAIVERS CASE ACTIONS: Approving or Reopening an Application." The system will now calculate the deductions on HCBS waiver cases for unmet medical needs, spousal diversion, and the administrative fee for a medical assistance income trust.

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
79-81	December 22, 2006

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



January 16, 2009

**GENERAL LETTER NO. 14-B(9)-41**

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, pages 29, 30, 85, 86, and 177, revised.

**Summary**

This chapter is revised to:

- ◆ Change language and add a cross-reference under the BCW2 P DED NEED field in section, "FACILITY CASE ACTIONS: Approving an Application: Automated."
- ◆ Add the "Medicaid for Kids with Special Needs" aid type 64-7 to the list of coverage groups that are not system-determined for financial eligibility under the section, "MEDICAID CASE ACTIONS: Approving an Application."
- ◆ Change some references that previously required a "day two" case action due to "batch processing" to now reference a "step two" case action due to "real time" processing.

**Effective Date**

Immediately.

**Material Superseded**

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
29	December 22, 2006
30	September 14, 2007
85	August 18, 2006
86	December 22, 2006
177	July 18, 2008

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
CHARLES J. KROGMEIER, DIRECTOR

August 28, 2009

## GENERAL LETTER NO. 14-B(9)-42

ISSUED BY: Bureau of Policy Analysis and Appeals

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 2, 4, 5, and 6), revised; pages 73, 78, 99, 100, 123, 125, 130, 136d, 136e, 136f, 138, 140, 142, 156, 160, 172, and 174, revised; and page 98d, new.

### Summary

This chapter is revised to:

- ◆ Add a new subsection, "Due to Department Decision That Client Is Not Disabled," under the section, "Canceling Ongoing Eligibility," and alphabetize the subsections.
- ◆ Reflect the change in the official name of the home-and community-based mental retardation (MR) waiver to the intellectual disabilities (ID) waiver effective July 1, 2009.
- ◆ Change instructions to reflect system changes under the section, "STATE SUPPLEMENTARY ASSISTANCE CASE ACTIONS: Approving an Application: Manual: Dependent Person on an Active Medicaid Case."
- ◆ Correct instructions and add coding and instructions for entries for a considered person under the section, "STATE SUPPLEMENTARY ASSISTANCE."

### Effective Date

Immediately.

### Material Superseded

Remove the following pages from Employees' Manual, Title 14, Chapter B(9), and destroy them:

<u>Page</u>	<u>Date</u>
Contents (page 2)	April 18, 2008
Contents (page 4)	February 8, 2008
Contents (page 5)	April 18, 2008
Contents (page 6)	February 8, 2008
73	March 18, 2009

78	December 22, 2006
99	April 18, 2008
100	July 18, 2008
123	December 22, 2006
125, 130	February 8, 2008
136d-136f, 138, 140, 142	February 8, 2008
156, 160	December 22, 2006
172, 174	February 8, 2008

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
CHARLES J. KROGMEIER, DIRECTOR

June 4, 2010

## GENERAL LETTER NO. 14-B(9)-43

ISSUED BY: Bureau of Financial, Health, and Work Supports  
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 1), revised; and pages 10, 11, and 12, revised.

### Summary

This chapter is revised to remove reference to form 470-2464, *Report for Enhanced Services*.

### Effective Date

Immediately.

### Material Superseded

This material replaces the following pages from Employees' Manual, Title 14, Chapter B(9):

<u>Page</u>	<u>Date</u>
Contents (page 1)	February 8, 2008
10	March 16, 2004
11, 12	May 20, 2003

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# STATE OF IOWA

CHESTER J. CULVER, GOVERNOR  
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES  
CHARLES J. KROGMEIER, DIRECTOR

November 5, 2010

## GENERAL LETTER NO. 14-B(9)-44

ISSUED BY: Bureau of Financial, Health, and Work Supports  
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (page 6), revised; Contents (page 7), new; and pages 38, 75, 87, and 181, revised.

### Summary

This chapter is revised to:

- ◆ Add new code "Z" to the TD05 RETRO field.
- ◆ Add a new section "Expiration of 90-Day Period" under SYSTEM-INITIATED ACTIONS: Automatic Changes to Cases.

### Effective Date

Immediately.

### Material Superseded

This material replaces the following pages from Employees' Manual, Title 14, Chapter B(9):

<u>Page</u>	<u>Date</u>
Contents (page 6)	August 28, 2009
38, 75, 87	February 8, 2008
181	June 24, 2005

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

November 9, 2012

## GENERAL LETTER NO. 14-B(9)-45

ISSUED BY: Bureau of Financial, Health and Work Supports  
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Title page, revised; Contents (page 1), revised; and pages 15, 16, and 17, revised.

### Summary

Chapter 14-B(9) is revised to remove all references to medical transportation claims.

### Effective Date

Immediately.

### Material Superseded

This material replaces the following pages from Employees' Manual, Title 14, Chapter B(9):

<u>Page</u>	<u>Date</u>
Title page	April 25, 2000
Contents (page 1)	June 4, 2010
14a	November 5, 2004
15	July 4, 2008
16	April 6, 2007
17	February 8, 2008

### Additional Information

Refer questions about this general letter to your area income maintenance administrator.



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

November 15, 2013

## GENERAL LETTER NO. 14-B(9)-46

ISSUED BY: Bureau of Financial, Health and Work Supports  
Division of Adult, Children and Family Services

SUBJECT: Employees' Manual, Title 14, Chapter B(9), *SSI-RELATED MEDICAID AND FACILITY CASE ACTIONS*, Contents (pages 1 through 6), revised; pages 1, 16, 17, 18, 18a, 19, 20, 20a, 20b, 21 through 46, 72, 72a, 78, 86, 98d, and 132, revised; and page 18b, new.

### Summary

Chapter 14-B(9) is revised to:

- ◆ Update the poverty limit for supplement for Medicare and Medicaid eligibles.
- ◆ Add instructions to code POV on MEPSD annual review.
- ◆ Clarify that aid type 73-1 must have state-funded payment issued manually.
- ◆ Reflect the name change of the ill and handicap waiver to the health and disability waiver.

### Effective Date

Immediately.

### Material Superseded

This material replaces the following pages from Employees' Manual, Title 14, Chapter B(9):

<u>Page</u>	<u>Date</u>
Contents (page 1)	November 9, 2012
Contents (page 2)	August 28, 2009
Contents (page 3)	September 14, 2007
Contents (pages 4 and 5)	August 28, 2009
Contents (pages 6 and 7)	November 5, 2010
1	August 18, 2006
16, 17	November 9, 2012
18, 18a	December 22, 2006
19, 20, 20a	November 5, 2004
20b, 20c	April 29, 2005
21	November 5, 2004
22	May 20, 2003



23	November 5, 2004
24-28	February 8, 2008
29, 30	January 16, 2009
31-34	February 8, 2008
35-37	August 18, 2006
38	November 5, 2010
39	December 22, 2006
40, 41	August 18, 2006
42	December 22, 2006
43	September 14, 2007
44-46	February 8, 2008
72	August 18, 2006
72a	December 30, 2005
78	August 28, 2009
86	January 16, 2009
98d	August 28, 2009
132	December 22, 2006

**Additional Information**

Refer questions about this general letter to your area income maintenance administrator.