Slide 1 - Welcome

Audio Script:
Welcome to training on the Medicaid Enrollment Unit, presented by the Indiana Department of Child Services.
To improve health outcomes for our children, and as a support to our Field Staff, the Indiana Department of Child Services has created a specialized Medicaid Enrollment Unit, also known as the MEU. The MEU facilitates statewide Medicaid enrollment for all DCS or Probation wards in placement.

Local staff will no longer be required to enroll children in Medicaid through the ICES system or process discontinuances or changes.

The MEU will perform these duties for DCS and Probation.

Audio Script:
To improve health outcomes for our children, and as a support to our Field Staff, the Indiana Department of Child Services has created a specialized Medicaid Enrollment Unit, also known as the MEU. The MEU facilitates statewide Medicaid enrollment for children in placement on Medicaid. Local staff will no longer be required to enroll children in Medicaid. These duties will now be performed by the MEU.
The role of the FCM or Probation officer is vital to the success of this program for our clients, and there are a few key tasks required to make this a success. These include:

- Providing timely and accurate data entry of all case actions, including placements, and all financial information.

- Working with Placement Resources to ensure that an Early and Periodic Screening Diagnosis and Treatment (EPSDT) exam by an approved physician.

- Cooperating with the CMOs, Advantage Health Solutions, and MDwise, Inc., in completing a health survey.
Slide 4 - Objectives

Objectives

- Medicaid Enrollment Unit (MEU) and its goals.
- Care Select, Indiana’s Care Management Program.
- Care Select’s CMOs, Advantage Health Solutions and MDwise, Inc.
- Early and Periodic Screening, Diagnosis, and Treatment (EPSDT).
- Instructions for how to collaborate with and engage the MEU.

Audio Script:
This training will provide you with important information about:
- The MEU and its goals;
- Indiana’s Care Management Program, Care Select;
- Care Select’s Care Management Organizations, Advantage Health Solutions, and MDwise Inc.;
- The Early and Periodic Screening, Diagnosis, and Treatment, also known as EPSDT, and;
Instructions for how to work together with the MEU for the benefit of children involved with DCS.
There are several goals for the Medicaid Enrollment Unit. The MEU is for DCS and Probation wards who are in out-of-home placements. The Goals for the MEU include:

- Providing a consistent process for enrolling our children in Medicaid.
- Improved communication with Division of Family Resources (DFR) concerning Medicaid coverage for wards.
- A reduced burden on field and Probation staff.
- A more effective and efficient enrollment of our children in Medicaid.
- Ultimately, improved health outcomes for our children.
Slide 6 - Sharing Information is Vital

Audio Script:
In your role as an FCM or Probation Officer, you may be asked to share information with the Medicaid Enrollment Unit, the Care Management Organization, and the Primary Medical Provider.
The overall goal of the MEU is to facilitate improved health outcomes for Indiana’s children, made possible by:

- Increasing the number of eligible children enrolled in Medicaid.
- Ensuring all wards are eligible to receive Care Select services.
- Providing Medicaid coverage so that FCMs and Probation Officers can strive to increase the number of children who have an EPSDT evaluation completed by an approved physician.
- When a case is closed, assisting in the successful transitioning of the child to another type of Medicaid.
- Assisting in establishing Medicaid Waiver cases or other special types of assistance.

Audio Script:
The overall goal of the Medicaid Enrollment Unit is to facilitate improved health outcomes for Indiana’s children, for both DCS and probation. This improvement in health outcomes will be possible by increasing the number of eligible children enrolled in Medicaid, ensuring that all of our wards are eligible to receive Care Select services, increasing the number of our children on Medicaid to increase the number who have an Early and Periodic Screening, Diagnosis, and Treatment evaluation completed by an approved physician. When a case is closed, assisting in the successful transitioning of the child to another type of Medicaid when applicable, and assisting in establishing Medicaid Waiver cases, or other special types of assistance.
Medicaid is an essential Health Care Program providing health care for almost 800,000 Hoosiers.

• DCS wants improved health outcomes for our children.

• Most DCS children are eligible when they are in an out-of-home placement.

• Eligible clients include wards in out-of-home care, some in-home CHINS, and children receiving adoption assistance.

Audio Script:
Medicaid is an essential health care program that improves the health and lives of hundreds of thousands of Hoosiers. Medicaid is more than just health coverage, it is vital health care, helping about one in seven Hoosiers, nearly 800,000 total to stay healthy, or start on the road to better health. Coverage is based on the individual demographics of a child or the household. Most DCS children are eligible when they are in an out-of-home placement, but the type of Medicaid is dependent on IV-E eligibility.

Eligible clients include:
• Wards in out-of-home care
• Some in-home CHINS, and;
• Children receiving adoption assistance
The State of Indiana recognizes the many benefits of having coordinated health care for all persons in Medicaid. As such, Indiana implemented a care management program called Care Select, created by the Indiana Family and Social Services Administration, FSSA, to serve Hoosiers.

Care Select will:

- Tailor benefits to the child more effectively.
- Improve the quality of care and health outcomes for those served.
- Control the growth of health care costs.
- Provide a holistic approach to member’s health needs.

Audio Script:
The State of Indiana recognizes the many benefits of having coordinated health care for all persons in Medicaid. As such, Indiana implemented a care management program called Care Select, created by the Indiana Family and Social Services Administration, FSSA, to serve Hoosiers.

Care Select will:

- Tailor benefits to the child more effectively;
- Improve the quality of care and health outcomes;
- Control the growth of health care costs, and;
- Provide a more holistic approach to members health needs.
Who is Covered by Care Select?

Care Select Members include:

- Aged;
- Blind;
- Physically and mentally disabled;
- M.E.D. Works Participants;
- Members in the Waiver Program;
- Probation or DCS wards receiving Medicaid, whether in placement or at home;
- Members receiving adoption assistance.

Audio Script:

Care Select Members include the:

- Aged;
- Blind;
- Physically and mentally disabled;
- M.E.D. Works participants;
- Members in the Waiver Program;
- Probation or DCS wards receiving Medicaid, whether in placement or at home, and;
- Members receiving adoption assistance.
Care Select Provides

- Care Coordination
  - Individualized services.
  - Assistance in gaining access to needed medical, social, educational, and other vital services.
- Disease Management
  - Both population-based and disease specific.
  - Includes diabetes, asthma, congestive heart failure and hypertension.
- Utilization Management
  - Ensures appropriate use of facilities, services and pharmacy.
- Care Managers
  - Assist in a number of ways including arranging appointments, scheduling transportation and educating members about their health conditions.

Audio Script:
Care Select provides our clients with:

- Care Coordination, which is individualized services as well as assistance in gaining access to needed medical, social, educational, and other services.
- Disease Management, which is population-based as well as targeting specific diseases. The Chronic Disease Management Program includes diabetes, asthma, congestive heart failure, and hypertension.
- Utilization Management, which ensures the appropriate use of facilities, services, and pharmacy.

Care Select provides its members with care managers to facilitate continuity of healthcare services. Care Managers assist members in a number of ways, such as arranging appointments, scheduling transportation, and helping educate members about managing their health conditions. Care Managers are housed in the particular CMO that is working under Care Select.
Care Select services are managed by two Care Management Organizations (CMOs):

Advantage Health Solutions  MDwise, Inc.

Audio Script:
Care Select services are managed and facilitated by two Care Management Organizations, or CMOs. The two Care Select CMOs are Advantage Health Solutions and MDwise, Inc.
Primary Medical Provider (PMP)

- Acts as the point of entry to the health care system, and the member’s main health care provider.
- Every member is linked to a PMP, and this becomes the member’s medical home.
- Can provide referrals to specialists, if needed.
- Works with the member, and the CMO to improve the overall health of the member.
- DCS and Probation staff should work with the PMP and/or the CMO to help ensure positive health outcomes for our clients.

Audio Script:
A Primary Medical Provider, or PMP, is the point of entry to the health care system, and the member’s main health care provider. A PMP can be a primary care physician, or a specialist. Every member is linked to a PMP, and this becomes the member’s medical home. A medical home is essentially a health care home base. The PMP can provide referrals to specialists as need warrants. The PMP works with the member and the CMO; either MDwise Inc. or Advantage Health Solutions, to improve the overall health of the member. DCS and Probation staff should work with the PMP and the CMO to help ensure positive health outcomes for our clients.
Slide 14 - Selecting a PMP and a CMO

Selecting a PMP and a CMO

- If a ward or adopted child already has a Primary Medical Provider, they will be enrolled in the PMP’s contracted CMO.

- If a ward or adopted child does not have a PMP, they will receive a letter regarding the PMP/CMO selection process.

- If a member does not select a PMP or CMO, they will be auto-assigned through Care Select.

Audio Script:

If a ward or an adopted child already has a PMP then the Member will be enrolled in that PMP’s contracted CMO. If a ward or an adopted child does not have a PMP, they will receive a letter outlining the process for selecting a PMP and a CMO. If the Member does not select a PMP or CMO, they will be auto-assigned through Care Select.
Audio Script:
Coordinated care works by using the four-step Care Management Model displayed on your screen. Review each step in the model, then click continue when you are ready to proceed.
Caregivers, FCMs and Probation Officers must ensure an Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) exam is completed when seeking an initial physical within 10 days of placement.

- Federal guidelines mandate that each state has EPSDT services for children and young adults enrolled in Medicaid.

- In Indiana, EPSDT services are provided through the HealthWatch/EPSDT Program.

- Program Improvement Plan action step.

Audio Script:
Caregivers, FCMs and Probation Officers must ensure that an Early and Periodic Screening, Diagnosis, and Treatment exam, also known as EPSDT, is completed when seeking an initial physical, within 10 days of placement. Federal guidelines mandate that each state has EPSDT services for children and young adults enrolled in a Medicaid health insurance program, in order to maximize the developmental capacities of all children regardless of circumstance. In Indiana, these services are provided through the HealthWatch/EPSDT Program. It is also important to note that this is a Program Improvement Plan action step.
EPSDT is a thorough health screening and treatment program available for children ages birth-21 years who receive Medicaid. The HealthWatch/EPSDT program screening must include:

- Assessment of both physical and mental health development
- A comprehensive unclothed physical exam
- Appropriate immunizations according to age and health history
- Laboratory tests, including a lead toxicity screening
- A nutritional assessment
- Health education, including anticipatory guidance
- Vision Screens
- Hearing Screens
- Dental Screens

Audio Script:
EPSDT is a thorough health screening and treatment program, available for children ages birth to 21 years of age who receive Medicaid. The HealthWatch/EPSDT program screening must include:

- A comprehensive health and developmental history, including assessment of both physical and mental health development;
- A comprehensive unclothed physical exam;
- Appropriate immunizations according to age and health history;
- Laboratory tests, including a led toxicity screening;
- A nutritional assessment;
- Health education, including anticipatory guidance;
- Vision screens;
- Hearing screens, and;
- Dental screens.
Early and Periodic Screening, Diagnosis, and Treatment (EPSDT)

- The HealthWatch/EPSDT is designed to reduce the risks of long-term impairment through early detection and treatment.
- The EPSDT exam is congruent with DCS goals and policy of providing health care to vulnerable children.

**Excerpt from DCS Policy 8.29:** For every child in out-of-home care the Indiana Department of Child Services (DCS) will ensure that a general health exam is scheduled within 10 business days of placement.

**Note:** A general health exam must consist of an Early and Periodic Screening, Diagnosis and Treatment (EPSDT) services, known in Indiana as HealthWatch. The general health exam by the child’s pediatrician, family doctor, or general practitioner will include screens for physical, dental, visual, auditory, and developmental health.

- After a child is enrolled in Medicaid, Care Select will assist with the EPSDT process.
- FCM and Probation Staff or caregivers must specifically ask for an EPSDT exam during the child’s initial health exam.

**Audio Script:**

Implemented through initial and subsequent periodic health screenings consistent with the recommendations of the American Academy of Pediatrics, the HealthWatch/EPSDT Program is designed to mitigate the risks of long-term impairment through the earliest possible detection and treatment of medical, developmental, and psychological conditions. DCS Policy 8.29, Routine Health Care, addresses continuity of healthcare services to vulnerable children, as well as requiring DCS to facilitate the provision of a general health exam consistent with the HealthWatch/EPSDT screening conventions, to all children in out-of-home care within ten business days of placement. Once the child is enrolled in Medicaid, Care Select will assist with the process on an ongoing basis. Most Medicaid eligible doctors can perform an EPSDT screening. Currently, statistics indicate that DCS wards and foster children are less likely to have an EPSDT evaluation than the general Medicaid population. We must make certain all of our youth are having these vital screens to improve their health. FCM and Probation staff or caregivers must specifically ask for the EPSDT exam during the child’s initial health exam.
Key Tasks for FCM or Probation

REMEMBER: The effectiveness of the MEU depends on FCMs and Probation Officers.

DCS and Probation Staff must:

- Provide timely and accurate data entry of all case actions, including placements and all financial information.

- Work with Placement Resources, the PMP, and the CMO to ensure completion of an EPSDT exam for every child by an approved physician.

- Cooperate with the CMOs in completing a health survey for all members. This is vital for an accurate initial assessment.

Audio Script:

FCMs or Probation Officers have a few key tasks in enrolling a youth. You must provide timely and accurate data entry of all case actions, including placements and all financial information. Work with Placement Resources, the PMP, and the CMO, to ensure that an EPSDT is completed for every child by an approved physician. Cooperate with the CMOs in completing the health surveys. A complete health survey is vital for an accurate initial assessment of the Members.
Slide 20 - Workflow 1

The Workflow

- The FCM or Probation Officer starts the enrollment process when they enter data on new cases, placement changes, or close a case.
- The process begins when the FCM or Probation Officer enters IV-E eligibility information in ICWIS, QUEST, or JTAC.
- If IV-E eligibility is approved, MEU is notified and they conduct a search of ICES and ICWIS records to see if the child is already receiving Medicaid.
  - If the child is receiving Medicaid, the MEU will request closure of the DFR case and enroll the child in MA4.
  - If the child is not a current Medicaid recipient, MEU will immediately enroll them.

Audio Script:
The work flow makes all this come together for our clients. The FCM or Probation officer starts the enrollment process with their timely and accurate data entry. This includes entry of information relating to new cases, placement changes, and placement ending, or closing the case. The process begins when the FCM or Probation Officer enters IV-E eligibility information in ICWIS, QUEST, or JTAC. If IV-E eligibility is approved, the MEU is notified through system generated e-mail, and they will conduct a search of ICES and ICWIS to see if the child is already receiving Medicaid. If the child is receiving Medicaid, the MEU will request the DFR case be closed, and they will enroll the child in MA4. If the child is not already receiving Medicaid, the MEU will immediately enroll them.
When approved, the Local Office Director, or designee, is notified of the effective date and the Medicaid number.

If IV-E eligibility is denied, the MEU reviews ICES/ICWIS to see if the child is receiving Medicaid.

- If the child is receiving Medicaid, the MEU will notify DFR that the child is a ward in placement.
- If the child is not a current Medicaid recipient, MEU will complete a Hoosier Healthwise application and forward the application to DFR/ACS for processing.

MEU will notify the Local Office of the decision by DFR/ACS.

The Hoosier Health Card (Medicaid Card) is sent to the child’s placement address.

Audio Script:
When approved, the Local Office Director or designee is notified of the effective date, and the Medicaid number of the child or children approved. If IV-E eligibility is denied, the MEU will review ICES and ICWIS to see if the child is receiving Medicaid. If the child is already receiving Medicaid, the MEU will notify DFR that the child is a ward in placement. If the child is not receiving Medicaid, the MEU will complete a Hoosier Healthwise application, and forward the application to DFR/ACS for processing. The local office is then notified of a decision by MEU. After Medicaid is approved, the Medicaid card, also known as the Hoosier Health card, will be sent to the child’s placement address.
In adoption cases, CEU will notify MEU upon case approval. MEU will enroll the child, and notify the Local Office.

To save time, various changes such as closures or address can be captured by MEU through system-generated reports.

Regardless of automation, direct communication between the MEU and field staff is vital.

Timely and accurate entry of IV-E eligibility information by FCMs and Probation Officers is critical to improving the health outcomes of our children.

FCMs and Probation Officers must copy birth records case files. This is our primary verification. MEU will not request a copy as a rule; however it must be on file for audit purposes. The “Client Statement” will not suffice.
Slide 23 – Redetermination of Eligibility

Redetermination of Eligibility

- Children enrolled in Hoosier Healthwise require an annual redetermination to be sure they remain eligible for Medicaid.
- The MEU will coordinate this process for both probation and DCS wards.
- Redetermination requires the Probation Officer or the FCM to assist the MEU in completing a form for each child.
- MEU will send a redetermination form to the Probation Officer or FCM annually.
- The Probation Officer or FCM must complete the form with the requested information and return it to the MEU within 5 business days.

Audio Script:
All children enrolled in Hoosier Healthwise require an annual redetermination to be sure they remain eligible for Medicaid. The MEU will coordinate this process for both probation and DCS wards. The redetermination process requires the Probation Officer or the FCM to assist the MEU in completing a form for each child. The MEU will send redetermination forms annually to the Probation Officer or FCM. The Probation Officer or FCM must complete the form with the requested information, and return the form to the MEU within 5 business days. The following slide will show an example of what the Medicaid Redetermination form looks like, and describe the specific information needed to answer each question.
Audio Script:
This is what the Medicaid Redetermination form looks like. At the top of the form, enter the child's name, date of birth, the ICES, and ICWIS number. In the section titled “Current Placement Date”, document the date the child began living at the current placement. If the child is not in placement, complete the field with N/A for not applicable. In the section titled “Current Placement Address and Phone”, list the address and phone number of the location where the child is currently living. Under the section labeled “Relationship of Caregiver to Child”, document the relationship of the caregiver at the child’s current residence, such as foster parent, guardian, parent, etc. For the section labeled “Date of CHINS or Wardship”, document the date on which the CHINS or Wardship was adjudicated. In the section that asks “Does the Child Attend School?”, document whether the child is in school, and if the child is attending, include the name of the school. In the child’s income section list any income received by or on behalf of the child. Sources of income would include, but are not limited to child support, Social Security benefits, wages, etc. For the section titled “Name, Address and Phone Number of Parents”, document the name and address of the child’s parents, whether or not the child lives with them. In the “Other Information” section, enter any information you think might be relevant to the Medicaid eligibility of the child. Finally, in the Form Completion Date section, include the signature and title of the person completing the form. This section is to be signed by the DCS or Probation Staff who provided the answers to the questions on this form.
Audio Script:
The goal is to complete the roll out of areas covered by the MEU by February 2010.

**Phase One** of the rollout is complete - Phase one includes the DCS counties in DFR Regions One, Two, and Marion County.

**Phase Two** is to roll out by December 2009 - Phase two includes the DCS counties in DFR Region Three, Four, and Five.

**Phase Three** is to roll out by February 2010 - Phase three includes the DCS counties in DFR Regions Six, Seven, and Eight.

These dates may be adjusted as necessary to implement the MEU successfully.
Steps You Can Take

- **Contact Care Select:**
  - Advantage Health Solutions: 1 (800) 784-3981
  - MDwise, Inc.: 1 (866) 440-2449
  - Care Select Helpline: 1 (866) 963-7383

- Assist the care coordinator with completing the child’s health care assessment or request the caregiver assist.

- Assist the care coordinator in locating DCS wards and foster children. MEU will keep addresses accurate in the ICES system when placement changes are recorded in ICWIS, QUEST, or JTAC.

Audio Script:

Let’s review the things you can do as an FCM or Probation Officer. You can contact the Care Select care coordinator. If you know the child’s care coordinator, and or which CMO the child has been assigned to, please contact the appropriate CMO’s Member Services Hotline. Advantage can be reached at 1-800-784-3981, and MDwise can be reached at 1-866-440-2449. If a PMP needs to be selected, or the PMP is unknown, please have the child’s FCM or Resource Parent call the Care Select Helpline at 1-866-963-7383 to select a PMP. You can also assist the care coordinator in completing an assessment of the child’s health care needs, or ask for their assistance. Finally, you can assist the care coordinator in locating the DCS wards and foster children whom they serve. MEU will keep addresses accurate in the ICES system when placement changes are recorded in ICWIS, QUEST, or JTAC.
Additional Resources

General Care Select Questions:
http://www.in.gov/fssa/ompp/2546.htm

Advantage Health Solutions CMO:
http://www.advantageplan.com

MDwise, Inc. CMO:
http://www.mdwise.org

Indiana HealthWatch/EPSDT Provider Manual:

DCS Policy 8.29: Routine Health Care:
http://www.in.gov/dcs/files/8.29_Routine_Health_Care.pdf

American Academy of Pediatrics:
http://www.aap.org

Audio Script:
You may view additional resources by clicking the links on your screen, or entering the web addresses into your web browser, and then click continue when you are ready to proceed.
This concludes training on the Medicaid Enrollment Unit presented by the Indiana Department of Child Services. Thank You.