

1620-N SERVICE CLOSURE AND CASE CLOSURE

EFFECTIVE DATE: September 8, 2021

REFERENCES: AMPM 1620-N

PURPOSE

The purpose of this policy is to identify the reasons an ALTCS covered service may be ended and to specify the steps needed when case closure should be pursued for a member currently enrolled with the Division.

DEFINITIONS

Arizona Health Care Cost Containment System (AHCCCS) – The state agency that is responsible for determining eligibility for Arizona Long Term Care Services (ALTCS).

Notice of Adverse Benefit Determination (NOA) – The written notice to the member regarding an Adverse Benefit Determination.

Office of Administrative Review (OAR) – The unit within the Division of Developmental Disabilities that processes and ensures adjudication of appeals and grievances.

POLICY

Service Closures

- A. Closure of a member's service(s) may occur for various reasons, including, but not limited to:
 1. The member is no longer ALTCS eligible as determined by AHCCCS.
 - a. If the member has been determined ineligible for ALTCS, the member/responsible person will be informed of this action and the reason(s), in writing, by AHCCCS. This notification will provide information about the member's rights regarding that decision.
 - b. The Focus task is the Division's "official" notification from AHCCCS that a change in the member's ALTCS eligibility has occurred. Thus, it is critical Support Coordinators review Focus tasks daily and take immediate action regarding services if notified that a member has been disenrolled from ALTCS.
 2. The Support Coordinator has assessed a service as no longer necessary.
 3. The Therapist, Division District Nurse or other clinician determines the goals have been met, the service is no longer medically necessary, or cost effective.
 4. Physician has determined that a service is no longer necessary.
 5. The member/responsible person requests discontinuance of a service.

6. The member/responsible person refuses to meet to re-assess the continuation of services currently authorized by the Division.
7. For members who are AzEIP eligible, non-ALTCS covered services shall be ended when the member ages out of the AzEIP program.

Case Closure

- A. Closure of the member's eligibility with the Division may occur for a variety of reasons, including but not limited to the following situations:
 1. The member has passed away.
 2. The member moves out of state. If the member is a minor child, residency requirements are dependent upon the residency of the custodial parent.
 3. The member/responsible person requests the member's case to be closed with the Division. If the member is ALTCS eligible and wishes to withdraw from the Division, the member/responsible person must first withdraw from ALTCS.
 4. The member/responsible person has requested a voluntary withdrawal from the ALTCS program.
 - a. A member who is disenrolling from ALTCS will generally remain enrolled through the end of the month in which the eligibility is terminated.
 - b. If the member voluntarily withdraws and wants ALTCS benefits to stop immediately, the disenrollment will be effective with the processing of the withdrawal by AHCCCS.
 - c. The Support Coordinator shall consult with his/her supervisor to determine if the member's eligibility shall be closed or placed in inactive status (e.g., involvement of protective service agencies, member likely to change his/her mind, request of the member/responsible person, etc.).
 5. The member is no longer eligible for the Division. See the Division's Eligibility Manual for further details regarding eligibility criteria and redetermination requirements.
 6. The member reaches the age of eighteen and does not wish to reapply for continuation of eligibility with the Division.
 7. Contact has been lost with member and their responsible person. This includes members who have moved from the previous residence and the SC is unable to locate.

- a. All communication methods available to the Support Coordinator (i.e., regular letter, certified letter/return receipt requested, telephone, email, text) have been unsuccessful.
 - b. Prior to pursuing case closure, the Support Coordinator shall consult with their Supervisor and ensure due diligence has been made to make contact and determine why attempts were unsuccessful.
 - c. If the member is ALTCS eligible, the Support Coordination shall continue attempts to schedule a meeting.
 - d. AHCCCS will not disenroll the member from the ALTCS program if they are able to contact the member/responsible person.
- B. The member continues to be the responsibility of the Division until the member's disenrollment is processed by AHCCCS and the Division is notified via AHCCCS roster. The Support Coordinator shall be notified via a Focus task of the member's disenrollment.
1. Members are eligible to receive medically necessary services through their ALTCS disenrollment date.
 2. The Support Coordination shall comply with all AHCCCS requirements, including scheduling and conducting Planning meetings until the member has been disenrolled from ALTCS.
- C. For members who are DD only or Targeted Support Coordination eligible the member can be disenrolled at any time.

Notices

- A. Notice of Adverse Benefit Action – If a previously authorized service is terminated, suspended, or reduced as no longer medically necessary or cost effective for an ALTCS eligible member, the member/responsible person shall be given a Notice of Adverse Benefit Determination (NOA) regarding the plan to discontinue the service. The NOA shall contain information about the member/responsible person's rights regarding the decision. A NOA is not required if the member/responsible person agrees to the reduction or termination. See Division Operations Policy 414 for additional details regarding NOA requirements.
- B. No Show Letter (DDD-2066A) - If a member has a planning meeting scheduled, and does not show, and does not attempt to contact the Division in advance of the meeting to reschedule, then the Support Coordinator shall send a DDD-2066A No Show Letter by regular and certified mail.
- C. Loss of Contact Letter (DDD-2065A) – If a member enrolled with the Division cannot be located, then the Support Coordinator shall send a DDD-2065A Loss of Contact Letter via certified and regular mail. If there is no response within required timelines, a Notice of DDD Closure shall be pursued.

- D. Notice of DDD Closure (DDD-2028) – When a member is no longer eligible for the Division or chooses to be disenrolled from the Division.
- E. The Office of Administrative Review
1. Except in a situation in which a member has passed away, the Division will send a notice to the member/responsible person advising that eligibility for the Division is ended. In addition, the Division will send a Notice of Action (NOA) when an ALTCS covered service is being terminated, suspended, or reduced. The notice shall include the right to request an Administrative Review along with the process for requesting an Administrative Review.
 2. The Office of Administrative Review (OAR) will notify the Support Coordinator when a request for Administrative Review is received from the member/responsible person.
 3. The Support Coordinator/Supervisor can also contact OAR if there are questions regarding the status of the Administrative Review.
- F. The Electronic Member Change Report (eMCR) is the Division’s notification to AHCCCS for ALTCS members when there is a change in the member’s eligibility for the Division. The AHCCCS eMCR Guidelines provides instructions regarding completing an eMCR on the AHCCCS website.
1. Upon notification of the member’s passing, the Support Coordinator shall immediately complete an eMCR.
 2. If the member/responsible person requests voluntary withdrawal, the DDD-2083A shall be completed and signed by the member/responsible person. The voluntary withdrawal form shall be attached to the eMCR.
 3. When an ALTCS eligible member has been redetermined no longer eligible for the Division, an eMCR shall not be completed until all appeal timeframes have been exhausted. The Support Coordinator/Supervisor can contact OAR if there are any questions regarding the status of any appeals.
 - a. Once all appeal timeframes have been exhausted, the Support Coordinator shall complete an eMCR requesting a PAS Reassessment. AHCCCS will then evaluate the member for the ALTCS/Elderly Physically Disabled (EPD) program.
 - b. If the member is determined eligible for the ALTCS/EPD program, the Support Coordinator shall work with the Division’s Transition Coordinator to coordinate a transfer between the Division and the ALTCS/EPD Program Contractor. The purpose is to ensure a smooth transition from the Division to the other ALTCS program contractor. Refer to Division Medical Policy 520 for additional information regarding member transitions.
 - c. If a member is disenrolled from ALTCS, but remains eligible for AHCCCS benefits, the Support Coordinator shall direct the

member/responsible person to the AHCCCS website for information regarding available AHCCCS Complete Care (ACC) Contractors and encourage the member to convey their choice of health plans to the AHCCCS Communication Center at 1-800-962-6690.

Documentation

- A. All attempts to contact the member/responsible person and actions taken shall be documented in the member's case record.
- B. When the reason for termination is the member's death, the Support Coordinator shall end date the service authorization(s) with the date of death.
- C. Upon notification from AHCCCS that the member has been disenrolled from ALTCS, the Support Coordinator shall "end date" the FOCUS authorizations. The Support Coordinator is responsible for notifying service providers when a service has ended, or the member is no longer eligible. Continuation of residential services using state funds shall be prior authorized by the District Program Manager and include a plan for re-applying for ALTCS.
- D. The Support Coordinator shall ensure all notices along with any Administrative or Judicial resolution are uploaded into the member's case record in OnBase. All member records shall be stored in accordance with Division Record Retention Policies. For further details, see Division Operations Policy 6001-I and Division Medical Policy 1620-L.
- E. The Support Coordinator shall provide the member/responsible person community referral information on available services and resources to meet the needs of members who are no longer eligible for ALTCS and/or the Division. This assistance shall be included as part of the member's case record.
- F. The Focus progress notes shall reflect service and case closure activity, including but not limited to:
 - 1. Reason for closure,
 - 2. Member's status at the time of the closures, and
 - 3. Referrals to community resources if the member is no longer ALTCS eligible.
- G. The Support Coordinator shall ensure the member's record is complete prior to closing the member's case. This includes, but not limited to, ensuring the member records have been uploaded to OnBase (e.g., communication on behalf of the member, Planning Documents, and other records) and Focus progress notes are updated to reflect steps taken to close the record and the reason for closure.