OLTL in Collaboration with the Independent Enrollment Broker (IEB) Beneficiary Support System (BSS) Update

Long-Term Services and Supports (LTSS) Subcommittee Meeting
August 7, 2024
Presented by: Christopher Bortz and Nathan Hassel

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PA IEB Beneficiary Supports

Delivering more supportive services to the PA Community HealthChoices (CHC) population by identifying individual needs and reducing barriers while providing assistance and guidance through the application process and throughout enrollment.

PA IEB Beneficiary Supports

How does the PA IEB provide Beneficiary Support Services?

- We provide support to enrolled PA CHC program participants as well as identify, track and resolve any issues that may prevent the timely processing of PA CHC applications

- Our beneficiary support staff are trained to identify special needs and issues that an applicant or enrolled participant may have.

- Beneficiary needs are identified during our in-person and telephone interactions with applicants and enrolled program participants.

- Using our proprietary beneficiary support issue tracking system, we assign staff to perform follow-ups and outreach on behalf of an applicant or enrolled program participant on any identified issues until they are resolved.

With our person-centered approach, we can remove barriers that could cause delays in application processing while assisting applicants and program participants in resolving real-world issues that may have impacted other aspects of their lives.

PA IEB Beneficiary Supports

Example beneficiary support for someone applying for the PA CHC Program:

Issue: Required documentation (Physician Certification) is delayed due to applicant's lack of transportation

Reason: The applicant has no means of getting to their doctor's office. Therefore, they are unable to obtain the required doctor signature(s) needed on the Physician Certification Form.

Support Provided: We provide information and guidance on local transportation services and agencies that will be able to assist the applicant in overcoming their transportation difficulties. We'll provide aid and conduct follow-ups until the applicant is able to obtain the doctors signature and submit the Physician Certification Form to finalize their application.

PA IEB Beneficiary Supports

Example beneficiary support for someone already enrolled in the PA CHC Program:

Issue: A program participant is having difficulties reading and understanding information related to Health Plan choice and the PA CHC plan transfer process.

Reason: Limited reading proficiency

Support Provided: We will read the PA CHC Health Plan Comparison Charts to the applicant over the phone or even schedule an in-person Support Visit to further assist the program participant in making an informed transfer decision.

PA IEB Beneficiary Supports
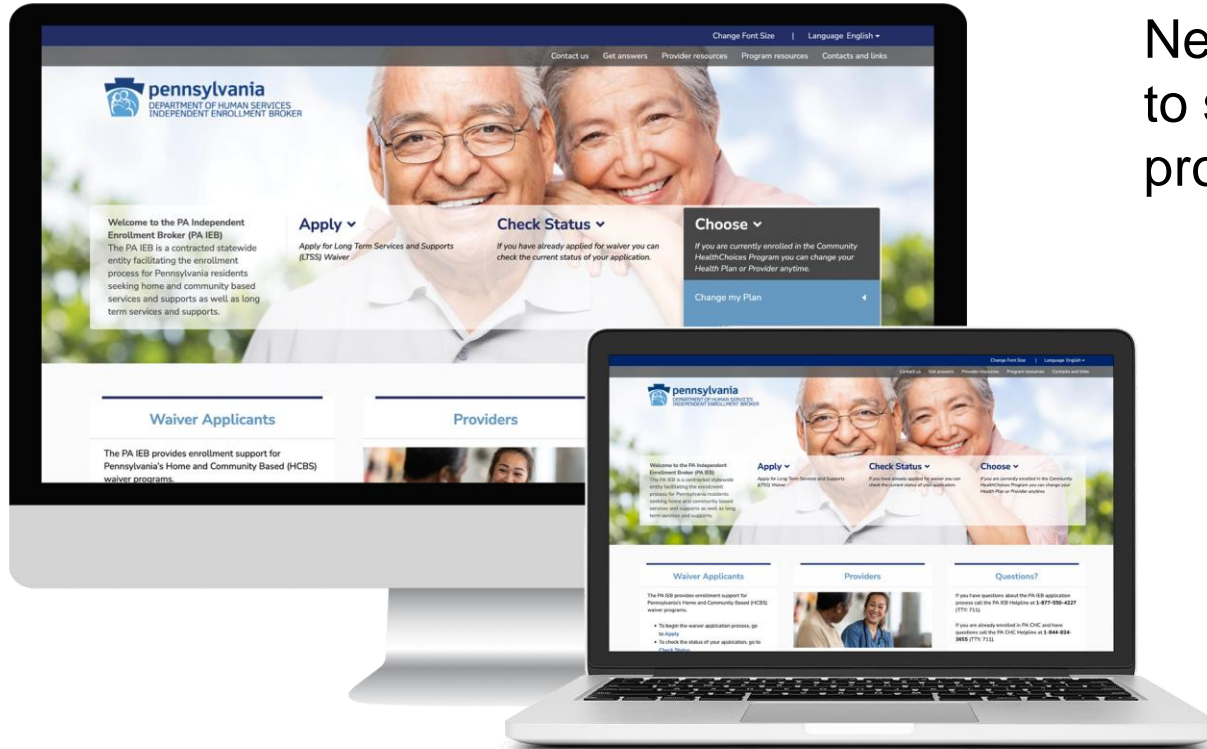
New online self-service features and enhancements to support beneficiaries and the overall application process:

- Online Referral Form

- Email and Text Message Notifications

- Required Information Document Upload

- Secure Authentication using Keystone ID

At the PA IEB we leverage technology to drive better outcomes for applicants and program participants.

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PA IEB Beneficiary Supports

Online Referral Form

- Accessible at https://paieb.com; click "Apply"

- Enables real-time submission of a referral; avoiding days lost when compared to traditional submission methods such as mail

- Ensures that all required information is collected which eliminates processing delays

- Allows the PA IEB to start applications faster which results in applicants receiving the benefits they need sooner

PA IEB Beneficiary Supports

Email and Text Message Notifications

- Keeps the applicant and/or authorized representative (AR) informed and engaged throughout the journey

- Notifies the applicant and/or AR when important information is needed

- Notifies the applicant and/or AR when their application status changes

- Opt-in or Opt-out at anytime

PA IEB Beneficiary Supports

Required Information Document Upload

- Highly accessible mobile-friendly file upload

- Ease of use lowers barriers for all applicants and authorized representatives when additional information must be submitted

- Real-time submission contributes to a reduction of overall time to process an application

PA IEB Beneficiary Supports

Secure Website Login using Keystone ID

- Enables secure self-service transactions such as Health Plan transfers on paieb.com

- Provides a seamless user experience when a user transitions between any Commonwealth of PA website (pa.gov) to https://paieb.com/

- Reduces Fraudulent Activity such as identity deception
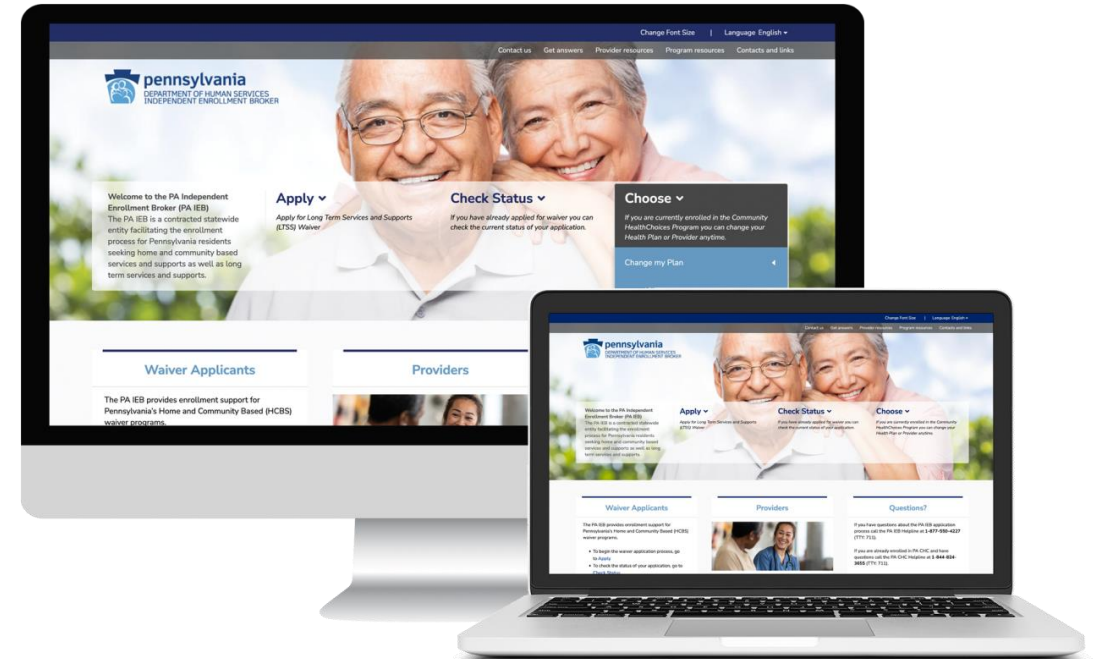
PA IEB Beneficiary Supports

If you or someone you know is applying for or already enrolled in the PA CHC Program and requires the type of beneficiary supports discussed today, contact us.

Applicants and prospective applicants call us at: **1-877-550-4227** (TTY: 711)

Enrolled PA CHC Program participants call us at: **1-844-824-3655** (TTY: 711)

Visit us online at: https://paieb.com

Questions?

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Enrollment Data

Long-Term Services and Supports (LTSS) Subcommittee Meeting
August 7, 2024

Presenter: Amy High - Office of Long-Term Living (OLTL), Section Chief,
Enrollment Unit

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IEB* Enrollment Data – Average Days in Status

Status	1/31/24	2/29/24	3/29/24	4/30/24	5/31/24	6/28/24	Description
Ready Assessment	9	10	10	10	11	8	IEB has received a referral from a third party, the IEB is outreaching to the Applicant/Representative to schedule visit
Scheduled	6	6	6	7	5	5	In-Home Visit has been scheduled
Assessment in Process	1	1	1	1	1	1	In-Home Visit completed and the IEB is reviewing completeness of intake documents requires
Medical Assistance (MA) PA 600 Review	5	8	4	4	6	4	IEB is waiting for the PA 600 or the PA 600 was received and the IEB to enter in COMPASS

* Independent Enrollment Broker (IEB)

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IEB Enrollment Data – Average Days in Status (cont.)

Status	1/31/24	2/29/24	3/29/24	4/30/24	5/31/24	6/28/24	Description
Physician Certification (PC) and Functional Eligibility Determination (FED) Pending	6	6	5	6	6	5	PC sent to the identified Physician and FED request sent to Aging Well
PC Pending / FED Pending	37	36	34	35	36	36	PC is pending / Completed FED received from Aging Well
PC Received / FED Pending	7	7	6	8	7	6	Completed PC received / FED pending with Aging Well

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IEB Enrollment Data – Average Days in Status (cont.)

Status	1/31/24	2/29/24	3/29/24	4/30/24	5/31/24	6/28/24	Description
Application Review (APP)	1	1	1	1	1	1	Medical Director Review Pending
OLTL Ready	19	19	19	18	26	28	Program Eligibility under review by OLTL
Ready Transition	65	61	59	55	55	59	Functionally eligible; applicant is pending nursing facility discharge
Approved	16	15	14	14	14	15	Functionally Eligible, 1768 Sent to County Assistance Office (CAO)

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IEB Enrollment Data – Average Days in Status (cont.)

Status	1/31/24	2/29/24	3/29/24	4/30/24	5/31/24	6/28/24	Description
1768 Denial	1	1	1	1	1	1	Functional Ineligible, Home and Community-Based Denial Notice Pending
Financial Approval	1	1	1	1	3	2	Financial Approval received, enrollment in process of being Finalized
MMS Ready	5	6	8	0	0	1	Pending acceptance by OBRA or Act 150 Service Coordinator
Financial Denial	0	0	0	0	0	0	Financial Denial received, application in process of completion
Financial Approval Mismatch	4	2	6	7	1	5	Incorrect Waiver code in the Client Information System (CIS), action needed by the CAO

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Current IEB Report – All Waivers

	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Grand Total	31328	33482	31563	30012	31490	34883	36423	34337	35004
Complete	20171	22372	22070	21399	21383	23501	24781	24012	23594
Complete in 90 Days	19326	21776	21584	21705	21767	22974	24212	23266	22893

1. Grand Total - All unduplicated applications in process this quarter
2. Complete - Total unduplicated applications completed this quarter
3. Total unduplicated applications completed during the quarter in 90 days

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Current IEB Report – All Waivers (cont.)

	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Complete > 90 Days with Excuse	329	316	318	347	576	471	528	679	683
Compliance Percentage	97%	99%	99%	98%	99%	99%	99%	99%	99%
Average Days to Complete	40	34	35	34	33	33	33	34.7	34.34

4. Total unduplicated applications completed during the quarter and over 90 days, but with excuse of a delayed enrollment

5. Using the above fields = (row 3 +row 4) / row 2 Average to complete excluding excused applications

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Current IEB Report – Under/Over 60

Over 60	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Grand Total	21116	22098	21104	20123	20740	22946	23444	22151	23084
Complete	13602	14699	14853	14393	14141	15459	16064	15314	15529
Complete in 90 Days	13025	14333	14537	13969	13760	15138	15711	14887	15101

1. Grand Total - All unduplicated applications in process this quarter
2. Complete - Total unduplicated applications completed this quarter
3. Total unduplicated applications completed during the quarter in 90 days

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Current IEB Report – Under/Over 60 (cont.)

Over 60	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Complete > 90 Days with Excuse	238	207	221	218	377	304	320	408	411
Compliance Percentage	98%	99%	99%	99%	99%	99%	99%	99%	99%
Average Days to Complete	40	34	34	33	33	33	32	34	34

4. Total unduplicated applications completed during the quarter and over 90 days, but with excuse of a delayed enrollment

5. Using the above fields = (row 3 + row 4) / row 2 Average to complete excluding excused applications

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Current IEB Report – Under/Over 60 (cont.)

Under 60	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Grand Total	10208	11384	10459	9889	10750	11937	12799	12186	11920
Complete	6566	7673	7217	7006	7242	8042	8735	8698	8065
Complete in 90 Days	6302	7443	7047	6736	7007	7836	8501	8379	7792

1. Grand Total - All unduplicated applications in process this quarter
2. Complete - Total unduplicated applications completed this quarter
3. Total Unduplicated applications completed during the quarter in 90 days

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Current IEB Report – Under/Over 60 (cont.)

Under 60	2022 Qtr 1	2022 Qtr 2	2022 Qtr 3	2022 Qtr 4	2023 Qtr 1	2023 Qtr 2	2023 Qtr 3	2023 Qtr 4	2024 Qtr 1
Complete > 90 Days with Excuse	81	109	97	129	199	167	208	271	272
Compliance Percentage	97%	98%	99%	98%	99%	99%	99%	99%	99%
Average Days to Complete	40	35	35	36	34	33	33	35	35
4. Total unduplicated applications completed during the quarter and over 90 days, but with the excuse of a delayed enrollment 5. Using the above fields = (row 3 + row 4) / row 2 Average to complete excluding excused applications									

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Q1 2024 Closure Reasons

Closed Reason	# Closed Apps	Description of Closure
Enrolled	7710	Applicant is enrolled in Home and Community-Based Services (HCBS).
Failure to Provide Information - CAO	6891	CAO issued denial due to applicant for not providing financial verification timely.
Unable to Reach Client	1716	IEB is unable to reach applicant from third party referral.
Incomplete	1668	Closed at day 86 of application due to incomplete or missing information. Example: MA 570 not returned.
Clinically Ineligible	1806	HCBS Denial Notice issued - Applicant determined Nursing Facility Ineligible (NFI) as a result of the FED and PC or Medical Director Review.
Not Interested in Services	889	Applicant is contacted after referral is received and notifies the IEB that they are not interested in receiving HCBS services.
Voluntary Withdrawal	1075	Applicant contacts the IEB and requests to withdrawal the application.
reApped	594	System corrected application and the status needs revised. The original application start date is used.
Financially Ineligible	386	CAO issued denial notice due to the applicant being determined financially ineligible.

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Q1 2024 Closure Reasons (cont.)

Closed Reason	# Closed Apps	Description of Closure
Already Receiving Services	243	Upon referral, IEB identifies that applicant is already enrolled in HCBS an is receiving services.
Applicant Not Discharged	182	Nursing Home Transition (NHT) applicant that does not discharge within 180 days of the application start date.
DECEASED	179	IEB is notified or identifies that the applicant is deceased before application is finalized.
Duplicate Application	115	Applicant has more than one open application. This is used for system correction when application is in an incorrect status.
Functionally Ineligible	51	Applicant is reviewed for OBRA or Act 150 and Denial notice issued due to applicant no meeting Program Requirements.
Does not meet 5-year Bar	31	In-take Visit Assessment (IVA) was completed and the individual requested to submit the 600L at a later time and did not return within 30 days.
Insufficient Information	43	Referral received that does not include enough information to follow up with individual to begin an application.
Expired Documents	15	Application closed due to application documents (FED/PC) over 12 months.
Grand Total	**23594**	

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FED Appeals Data

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FED Appeals Data

FED Appeals Data	Jan	Feb	Mar	Apr		May		June	
Status	**Medical Director Review - NFI**	**Medical Director Review - NFI**	**Medical Director Review - NFI**	**Medical Director Review - NFI**	**NFI-FED and PC NFI**	**Medical Director Review - NFI**	**NFI-FED and PC NFI**	**Medical Director Review - NFI**	**Grand Total**
Appeal Hearing Scheduled	*		*	47		23	*		72
Appeal Initiated		*	*	24		86		75	202
Appeal Withdrawn	51	50	46	21	*				169
Appeal Waiting Judge Decision	*	*	*	*					6
Appeal Settled	22	19	*	*			*		46
Appeal Stipulated Settlement	*	*	*	*					15

APPEAL HEARING SCHEDULED - Hearing Date scheduled

APPEAL INITIATED - Appeal Received - Hearing Date has not yet been scheduled

APPEAL WITHDRAWN - Following Pre-Hearing Appellant Withdrew

APPEAL WAITING JUDGE DECISION - Pending decision by the Administrative Law Judge (ALJ)

APPEAL SETTLED - Hearing outcome was a stipulated settlement (example - new FED or Applicant to submit additional information to be considered)

APPEAL STIPULATED SETTLEMENT - Hearing outcome was a stipulated settlement (example - new FED or Applicant to submit additional information to be considered)

* Data suppressed for confidentiality.

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FED Appeals Data (cont.)

FED Appeals Data	Jan	Feb	Mar	Apr		May		June	
Status	Medical Director Review - NFI	Medical Director Review - NFI	Medical Director Review - NFI	Medical Director Review - NFI	NFI-FED and PC NFI	Medical Director Review - NFI	NFI-FED and PC NFI	Medical Director Review - NFI	Grand Total
Appeal Denied	*	*							5
Appeal Dismissed	20	11	17	*		*		31	56
Appeal Approved	*								2
Appeal Settlement Denied	*								2
Grand Total	**103**	**93**	**84**	**107**	**1**	**110**	**1**	**76**	**575**

APPEAL DISMISSED - ALJ Dismissed Appeal (example - Appellant cannot be reached

APPEAL APPROVED - ALJ found in favor of Appellant Applicant moved forward for Financial Eligiblilty Determination

APPEAL SETTLEMENT DENIED - Appeal Denied following outcome of the Stipulated Settlement

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MCO Plan Change Reason Counts

Reason	Count
Transferring from Auto-Assigned Managed Care Organization (MCO)	195
Dissatisfied with Medical MCO Services	170
Current Provider no longer working with MCO	136
Would not give reason	40
Dissatisfied with Service Coordinator	35
Prefers another MCOs benefits	25
Doctor left plan	22
Primary Care Physician (PCP) Recommendation	20
Family Friend Recommendation	19
Out of plan services wanted	15
Dissatisfied with range or length of services - too limited	*
Prefers nonparticipating doctor or hospital	*
Moved Moving Out of Area	*
Dissatisfied with MCOs services marketing rep	*

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MCO Plan Change Reason Counts (cont.)

Reason	Count
Can't stay with current nonparticipating doctor for treatment	*
Dissatisfied with dental program provider	*
Mail Plan Change - No reason given	*
Someone other than those listed above recommendation	*
Dissatisfied with vision program provider	*
Dissatisfied with Doctor PCP	*
Not Applicable - Not Disenrolling from Another Plan	*
Dislikes using referrals	*
Location of doctors inconvenient	*
Dissatisfied with Drug Alcohol or Mental Health Services	*

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MCO Plan Change Reason Counts (cont.)

Reason	Count
Does not agree with waiver service plan	*
Dissatisfied with pharmacy program provider	*
MCO has denied reduced my services	*
Personal Assistance Services (PAS) agency does not accept current plan	*
Dislikes Making Appointments	*
Language Problem	*
Receives bills for services	*
Grand Total	**747**

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Questions?

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