

# Enrollment and Redeterminations

Long-Term Services and Supports (LTSS) Subcommittee Meeting  
January 7, 2026

Presenters:

Amy High – Section Chief, Enrollment Unit

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Bureau of Coordinated and Integrated Services, Office of Long-Term Living (OLTL)



Pennsylvania  
Department of Human Services

## ► Independent Enrollment Broker (IEB) Enrollment Data – Average Days in Status

Status	6/30/25	7/31/25	8/28/25	9/30/25	10/29/25	11/26/25	Description
Ready for Assessment	13	14	14	19	20	12	IEB has received a referral from a third party, the IEB is outreaching to the Applicant/Representative to schedule Visit.
In-Home Visit Scheduled	7	6	6	7	7	7	In-Home Visit has been scheduled
Assessment in Process	3	1	1	1	2	1	In-Home Visit completed and the IEB is reviewing completeness of intake documents required.
Medical Assistance (MA) PA 600 Review	8	7	7	7	7	7	IEB is waiting for the PA 600 or the PA 600 was received and IEB to enter in COMPASS

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

Status	6/30/25	7/31/25	8/28/25	9/3/25	10/29/25	11/26/25	Description
Physician Certification (PC) and Functional Eligibility Determination (FED) Pending	7	6	6	6	6	6	PC sent to the identified Physician and FED Request was sent to Aging Well
PC Pending / FED Received	34	33	33	35	35	34	PC is pending / Completed FED received from Aging Well
PC Received / FED Pending	11	10	12	14	12	8	Completed PC received / FED pending with Aging Well

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

Status	6/30/25	7/31/25	8/28/25	9/30/25	10/29/25	11/26/25	Description
Application (APP) Review	2	2	0	3	1	1	Medical Director Review Pending
OLTL Ready	22	28	24	23	30	21	Program Eligibility under review by OLTL
Ready Transition	58	57	60	60	61	58	Functionally eligible, Applicant is pending nursing facility discharge
Approved	18	16	17	16	16	16	Functionally Eligible, 1768 sent to County Assistance Office (CAO)



# ▶ IEB Enrollment Data – Average Days in Status

Status	6/30/25	7/31/25	8/28/25	9/30/25	10/29/25	11/26/25	Description
1768 Denial	3	1	1	1	1	1	Functionally ineligible, Home and Community-Based Services (HCBS) Denial Notice pending
Financial Approval	1	4	2	3	2	3	Financial Approval received, enrollment in process of being finalized
Service Coordinator Pending	0	1	3	7	13	22	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	6	4	1	4	0	0	Incorrect Waiver code in Client Information System (CIS), action needed by the CAO.

## Current IEB Report – All Waivers

	2024 QTR1	2024 QTR2	2024 QTR3	2024 QTR4	2025 QTR1	2025 QTR2	2025 QTR3
Grand Total	35004	34918	35443	34673	36624	38163	38311
Complete	23594	24177	23752	23937	23523	26182	25441
Complete in 90 Days	22893	23781	23355	23446	22975	25755	24955
Complete > 90 Days With Excuse	683	381	363	407	492	400	427
Compliance Percentage	99%	99%	99%	99%	99%	99%	99%
Mean Days to Complete	34	33	36	34	34	34	34

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
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

## Current IEB Report – Applicants Over 60 Years of Age

Over 60	2024 QTR1	2024 QTR2	2024 QTR3	2024 QTR4	2025 QTR1	2025 QTR2	2025 QTR3
Grand Total	23084	22955	22586	23180	24066	24940	25442
Complete	15529	15998	15087	15897	15311	17113	16906
Complete in 90 Days	15101	15751	14863	15582	14968	16847	16592
Complete > 90 Days With Excuse	411	242	212	267	314	256	277
Compliance Percentage	99%	99%	99%	99%	99%	99%	99%
Average Days to Complete	34	32	38	34	34	34	33

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
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

## Current IEB Report – Applicants Under 60 Years of Age

Under 60	2024 QTR1	2024 QTR2	2024 QTR3	2024 QTR4	2025 QTR1	2025 QTR2	2025 QTR3
Grand Total	11920	11963	12857	11493	12558	13223	12869
Complete	8065	8179	8665	8040	8212	9069	8535
Complete in 90 Days	7792	8030	8493	7864	8007	8908	8363
Complete > 90 Days With Excuse	272	139	151	140	178	144	150
Compliance Percentage	99%	99%	99%	99%	99%	99%	99%
Average Days to Complete	35	33	33	35	35	35	34

1. Grand Total - All unduplicated applications in process this quarter
2. Complete - Total unduplicated applications completed this quarter
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5. Using the above fields = (row 3 + row 4) / row 2 Average to complete excluding excused applications

Data Source: Maximus IEB





# Q3 2025 Closure Reasons

Closed Reason	Count	Description of Closure
Enrolled	8152	Applicant enrolled in HCBS.
Failure to provide information to the CAO	7812	CAO issued denial due to applicant not providing financial verification timely
Unable to Reach Client	2319	IEB unable to reach applicant from third party referral.
Incomplete	1289	Closed at day 86 of application due to incomplete or missing information Example: MA 570 not returned
Clinically Ineligible	1799	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	1457	Applicant is contacted after referral is received and notifies the IEB that they are not interested in receiving HCBS services
Voluntary Withdrawal	607	Applicant contacts the IEB and requests to withdraw the application.
reApped	727	System corrected application and the status needs revised. The original application start date is used.

## ➤ Q3 2025 Closure Reasons (cont.)

Closed Reason	Count	Description of Closure
Financially Ineligible	473	CAO issued denial notice due to the applicant being determined financially ineligible.
Already Receiving Services	298	Upon referral, IEB identifies that applicant is already enrolled in HCBS and is receiving services.
Applicant Not Discharged	174	Nursing Home Transition (NHT) applicant that does not discharge within 180 days of the application start date.
Deceased	152	IEB is notified or identifies that the applicant is deceased before application is finalized.
Duplicate Application	102	Applicant has more than one open application. This is used for system correction when application is in an incorrect status.
Functionally Ineligible	47	Applicant is reviewed for OBRA or Act 150 and Denial notice issued due to Applicant not meeting Program Requirements.
Does not meet 5- year Bar	24	CAO issued notice indicating the applicant does not meet the 5- year residency requirement to receive MA HCBS services.

# Q3 2025 Closure Reasons

Closed Reason	Count	Description of Closure
Medical Assistance Application Not Received	35	Intake Visit Assessment was completed and the individual requested to submit the 600L at a later time and did not return within 30 days.
Insufficient Information	12	Referral received that does not include enough information to follow up with individual begin an application.
Expired Documents	*	Application closed due to application documents (FED/PC) over 12 months
Grand Total	25441	

\* Data suppressed for confidentiality

# FED Appeals Data



FED Appeals Data

	Jan	Feb	Mar	Apr	May
Status	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI
Appeal Hearing Scheduled	*	*	*	*	*
Appeal Initiated	*	*	*	*	*
Appeal Withdrawn	28	24	39	37	40
Appeal Settled	16	11	11	18	15
Appeal Stipulated Settlement	0	0	*	*	0
Appeal Dismissed	22	21	16	28	27
Appeal Settlement Denied	*	0	*	*	*
Appeal Approved	0	0	0	*	*
Appeal Denied	*	*	*	*	*
Appeal Closed	0	0	*	0	*
Grand Total	77	63	83	96	95

\* Data suppressed for confidentiality

## ➤ FED Appeals Data (cont.)

	Jun		Jul	Aug	Sep
Status	MEDICAL DIRECTOR REVIEW - NFI	NFI – FED AND PC NFI	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI
Appeal Hearing Scheduled	*	0	*	*	*
Appeal Initiated	*	0	*	*	0
Appeal Withdrawn	47	*	39	24	*
Appeal Settled	18	0	25	*	*
Appeal Stipulated Settlement	0	0	0	*	*
Appeal Dismissed	43	0	18	*	*
Appeal Settlement Denied	0	0	0	0	0
Appeal Approved	0	0	0	0	*
Appeal Denied	*	0	0	*	0
Appeal Closed	0	0	0	0	0
<b>Grand Total</b>	<b>119</b>	<b>1</b>	<b>90</b>	<b>43</b>	<b>24</b>

\* Data suppressed for confidentiality



# FED Appeals Data (cont.)

	Oct	Nov	Grand Total
Status	MEDICAL DIRECTOR REVIEW - NFI	MEDICAL DIRECTOR REVIEW - NFI	
Appeal Hearing Scheduled	0	*	31
Appeal Initiated	22	60	109
Appeal Withdrawn	*	*	292
Appeal Settled	0	0	120
Appeal Stipulated Settlement	*	0	9
Appeal Dismissed	*	0	191
Appeal Settlement Denied	0	0	8
Appeal Approved	0	0	3
Appeal Denied	0	0	19
Appeal Closed	0	0	2
Grand Total	28	65	784

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## ➤ FED Appeals Data (cont..)

- **Appeal Withdrawn** - Following Pre-Hearing Appellant Withdrew
- **Appeal Initiated** - Appeal Received - Hearing Date has not yet been scheduled
- **Appeal Hearing Scheduled** - Hearing Date Scheduled
- **Appeal Dismissed** – Administrative Law Judge Dismissed Appeal ( example Appellant cannot be reached)
- **Appeal Waiting Judge Decision** - Pending decision by the Administrative Law Judge Dismissed
- **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)
- **Appeal Settlement Denied** – Appeal Denied following outcome of the Stipulated Settlement
- **Appeal Approved** – Administrative Law Judge Dismissed found in favor of Appellant Applicant moved forward for Financial Eligibility Determination



## ➤ MCO Plan Change Reasons

Reason	Count
Current Provider no longer working with Managed Care Organization (MCO)	210
Dissatisfied with Medical MCO Services	180
Transferring from Auto-Assigned MCO	116
Dissatisfied with Service Coordinator	38
Prefers nonparticipating doctor or hospital	34
Would not give reason	25
Dissatisfied with range or length of services - too limited	12
Out of plan services wanted	*
Doctor left plan	*
Family Friend Recommendation	*
Someone other than those listed above recommendation	*
Dissatisfied with Doctor PCP	*
Dissatisfied with pharmacy program provider	*
Prefers another MCOs benefits	*

\* Data suppressed for confidentiality



## ➤ MCO Plan Change Reasons (cont.)

Reason	Count
Dissatisfied with Drug Alcohol or Mental Health Services	*
Personal Assistance Services (PAS) agency does not accept current plan	*
Dissatisfied with dental program provider	*
Primary Care Physician (PCP) Recommendation	*
I do not agree with waiver service plan	*
Pharmacist recommendation	*
<b>Grand Total</b>	<b>645</b>

\* Data suppressed for confidentiality

# NFI Reassessments



## ➤ 2025 CHC HCBS Waiver Participants Assessed NFI

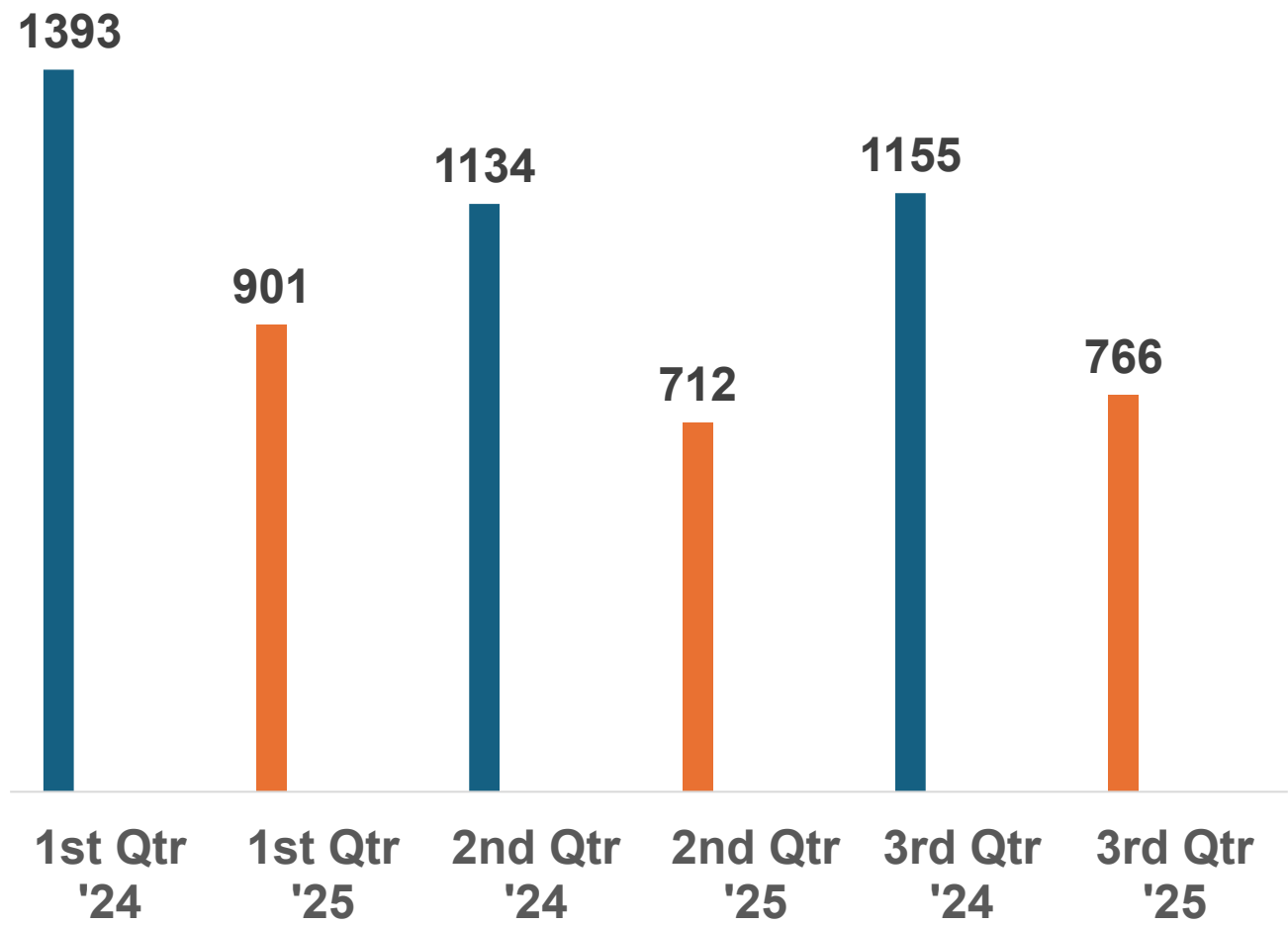
MCO	First Quarter (Jan.-Mar.)	Second Quarter (Apr.-Jun.)	Third Quarter (Jul.-Sept.)
Amerihealth Caritas (AHC) / Keystone First (KF)	687	533	538
Pennsylvania Health and Wellness (PHW)	201	173	219
UPMC	13	*	*
Total	901	712	766

\* Data suppressed for confidentiality



# MCO NFI Quarter Comparison

MCO NFI Quarter Comparison



- Downward Trend in CHC-HCBS participants becoming NFI
- 35 % reduction in NFIs

# Questions

