# Eligibility Case Manager (ECM) Checklist for Oregon Project Independence – Medicaid (OPI-M)

**Note:** This checklist is a guide. Not every case will require all the steps outlined in this checklist to be completed.

Updated 9/11/24. Changes are in Red.

**Documents to mail or deliver prior to CA/PS assessment:**

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| OPI-M Application  SEL 503 – Voters Registration Card  MSC 231 – Authorized Representative and Alternate Payee  DHS 5139 – What to Expect from Your Assessment for Long-Term Services & Supports  DHS 8958 – Medicaid In-home Service Options brochure  DHS 9373 – Reporting Abuse of Older Adults & People with Physical Disabilities  MSC 457D – Voluntary Agreement to Take Action on a Case (if applying for only OPI-M) |

**Case set-up in Oregon ACCESS (OA):**

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| Set up or review the Oregon ACCESS (OA). See [Oregon Access Person Search Instructions](http://www.dhs.state.or.us/spd/tools/cm/OACCESS_CAPS%20Info/Person_Search6-3-24.pdf) for help creating the OA case.  ECM updates demographic tabs in OA. | Review or Complete the Case Overview tab in the Benefit screen of OA, including:  Eligibility Case Manager (ECM) is assigned to the Oregon Access (OA) case with the role ‘Intake’. Check the box indicating ECM is marked as the ONE CM.  ECM narrates in OA the date of request (DOR) for services and updates the dates in the Case Overview tab in OA. |
| ECM contacts consumer and/or representative to schedule CA/PS assessment. See [Intake Guide for Case Managers](http://www.dhs.state.or.us/spd/tools/cm/OACCESS_CAPS%20Info/IntakeGuideforCaseManagers%204-17-24.docx) for more information. (Follow local office process.)  ECM reviews [Service Program Options Comparison Chart](https://dhsoha.sharepoint.com/:w:/r/teams/Hub-ODHS-APD-Staff-Tools/APD%20Case%20Management%20Library/Service%20Program%20Comparison%20Chart%202.14.24%20Final.docx?d=weca792fbe78840049e2db21be1c50bec&csf=1&web=1&e=nqwG1Q) with consumer and/or representative. OPI-M chosen. | Complete Title XIX CA/PS assessment.  ECM collects any financial verification documents the Central Office Financial Eligibility (CO FE) team will need for financial eligibility. Example: trusts, burial plans, life insurance, annuities, certificates of deposits, etc.  Note: Collecting financial verification documents is not required (by the ECM) but helps speed up the eligibility determination. |

**ECM OPI-M Application process:**

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| Consumer and/or representative completes the [OPI-M Application](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/Application_Form_1.0.2_7-1-24.pdf), including Asset Verification System (AVS) consent.  Note: A wet signature or alternative signature that meets requirements per [APD-PT-22-027](https://www.oregon.gov/odhs/transmittals/APDTransmittals/pt22027.pdf) is required. | Consumer and/or representative completes the MSC 0231 – Authorized Representative form if someone else will be completing the financial interview.  Note: A wet signature is required. |
| ECM determines the Continuous Period of Care (CPC) date if applicant is married. Document the CPC in the “Office use” section of the application. | Consumer and/or representative completes the voluntary withdraw 457d waiving LTSS, if only OPI-M is requested.  Note: A wet signature is required. |

**Follow these steps if the case goes through ONE**:

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| Update ONE with current demographic information (follow your local office procedure) | Review Authorization History for any approved benefits in ONE.  Note: the approvals on the OPI-M application, office use section.  **and/or**  Look at the Eligibility Summary in ONE, checking the Notice Reasons, RFI Details, View Disqualification, etc. for medical and service TOAs. You may need to select the Other Evaluated TOAs hyperlink as well. |
| Review ONE case alerts on a regular basis.  See [CM Homepage Overview in ONE](https://dhsoha.sharepoint.com/teams/Hub-ODHS-APD-Staff-Tools/APD%20Case%20Management%20Library/Forms/AllItems.aspx?id=%2Fteams%2FHub%2DODHS%2DAPD%2DStaff%2DTools%2FAPD%20Case%20Management%20Library%2FCM%5FHomepage%5Fand%5FCase%5FManager%5FAlert%5FLog%5FOverview7%2D16%2D24%2Epdf&parent=%2Fteams%2FHub%2DODHS%2DAPD%2DStaff%2DTools%2FAPD%20Case%20Management%20Library) and [CM Alert Descriptions in ONE](https://dhsoha.sharepoint.com/teams/Hub-ODHS-APD-Staff-Tools/APD%20Case%20Management%20Library/Forms/AllItems.aspx?id=%2Fteams%2FHub%2DODHS%2DAPD%2DStaff%2DTools%2FAPD%20Case%20Management%20Library%2FCM%5FAlert%5FDescriptions7%2D16%2D24%2Epdf&parent=%2Fteams%2FHub%2DODHS%2DAPD%2DStaff%2DTools%2FAPD%20Case%20Management%20Library). | Regularly monitor the ONE service denial report (follow local process). See the [Denials Report for APD/AAA Case Managers](https://dhsoha.sharepoint.com/teams/Hub-DHS-ET/ET%20Operating%20Procedures/Forms/AllItems.aspx?id=%2Fteams%2FHub%2DDHS%2DET%2FET%20Operating%20Procedures%2FQRG%5FMedical%20Denials%20and%20Terminations%20with%20LTSS%2Epdf&parent=%2Fteams%2FHub%2DDHS%2DET%2FET%20Operating%20Procedures) QRG. |
| For ONE to send a denial, request an Eligibility Worker (EW) update the SELG required by date.  **or**  If withdrawing, have an EW take the appropriate actions in ONE. | |

**CO FE Team Referral:**

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| ECM sends referral to Central Office Financial Eligibility (CO FE) team. Please use the [OPI-M Central Office Financial Eligibility Referral Email Template](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/OPI-M_CO_FE_Referral_Email_Template8-5-24.docx). |
| If the referral to the CO FE team has occurred, update the team with any changes to the ONE determination. |

**PMDDT and MED:**

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| ECM reviews for disability determination for OPI-M applicant under age 60. See the [APD/AAA Eligibility Case Manager IEVS Guide](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/IEVS%20Guide%205.20.24.pdf), [OPI-M PMDDT Guide](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/OPI-MPMDDTGuide4-17-24.pdf) and [OPI-M PMDDT MED Flowchart](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/OPI-M_PMDDT_MED_Flowchart_v7.30.24.pdf).  If a PMDDT referral **IS** needed, follow either the ONE or OPI-M PMDDT process. This will vary by case.  If a PMDDT referral is **NOT** needed and the applicant is only asking for  OPI-M, **DO NOT** send the case through the ONE system. |
| ECM reviews for MED and sends referral if consumer is under age 60, meets SPL and financial eligibility criteria for OPI-M, and has a diagnosis of a mental, emotional, or substance abuse disorder. |

**MMIS:**

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| ~~ECM checks MMIS for active benefit plan. If there is no active benefit plan, send referral to~~ [~~OPI-M MMIS Request~~](https://forms.office.com/g/ChAkM83MxE)~~.~~ (Changed to SCM task.) |
| APD local office assists SCM with setting up MMIS Plan of Care (POC) and MMIS authorizations as requested. |

**Post Eligibility:**

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| ECM sends [OPI-M Decision Notice](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/OPI-MDecisionNotice%205-20-24.pdf) following notification by the CO FE team of financial eligibility approval, along with all other [OPI-M Form Requirements](http://www.dhs.state.or.us/spd/tools/cm/Oregon%20Project%20Independence-Medicaid%20and%20Family%20Caregiver%20Assistance%20Program/OPI-M_Forms_Requirements_v.7.25.24.pdf).  Note: Denial and pending notices will be sent by the staff member denying or pending. If an OPI-M Resource Assessment (RA) was completed by the CO FE team, a copy needs to be sent with the Decision Notice. |
| ☐ ECM narrates OPI-M eligibility decision. (Narration template coming soon) |
| ECM or other staff sends all required OPI-M documents to EDMS or Laserfiche. |
| ECM transfers case to local AAA office Service Case Manager (SCM).  (Follow local process) |