



A suggested Proactive Process for skilled nursing centers and Assisted Living Facilities that have Medicaid residents to avoid unnecessary denials and ineligibility since the Public Health Emergency hold on verifications and disenrollment.

1. Identify who the Medicaid (AZ- ALTCS) members are in your facility
2. Research when their eligibility redeterminations are due
3. Make sure there is an authorized representative assigned – family member, friend, paid rep or staff member that will handle the redetermination.
 - a. Make sure you stay in touch with the representative and assist if needed
4. If a Request for Information (RFI) has been received make sure you confirm the due date for the request, clarify the information that it being identified and then create a plan to gather necessary information to satisfy the request.
5. Issues to review:
 - a. Does the member still meet income requirements?
 - b. Does the member still meet resource requirements?
 - c. Does the member still meet the medical requirements?

Proactively addressing these issues BEFORE the redetermination is due will be crucial to your members keeping their eligibility intact.

If you need assistance understanding options to avoid ineligibility for a resident before a disenrollment occurs, please reach out to the Benefit Results team- we are ready to assist you!

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