

Memo Date: September 14, 2017

Memo Topic: Waiver Intake Workflow Status

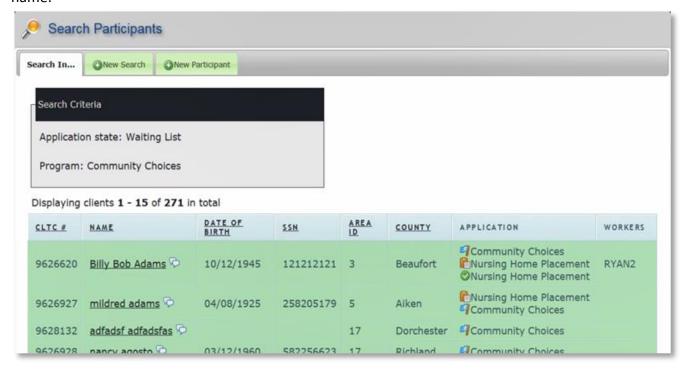
To: Medicare-Medicaid Plans (MMPs)

From: South Carolina CMT

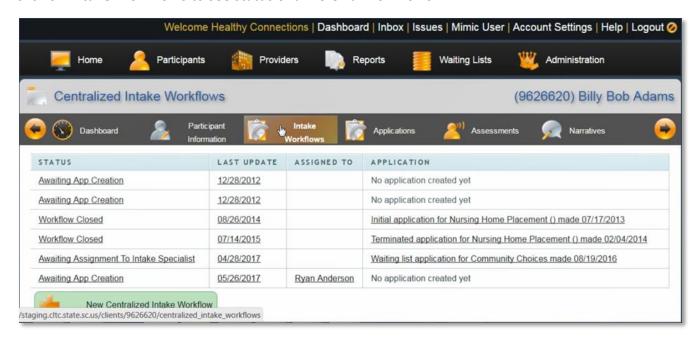
Please be advised that Medicare-Medicaid Plans (MMPs) have the ability to view the status of members' Community Long Term Care (CLTC) waiver application intake through Phoenix. Note: Applications from non-SSI members must go through medical level of care (LOC) eligibility determination and financial eligibility determination. Members with SSI only need to meet medical LOC eligibility determination.

After logging into Phoenix, please follow the steps below to view a member's waiver intake workflow status.

1. Search for the member. A blue flag ( ) indicates processing is in progress. Click on the member's name.



2. Click on Intake Workflows to see status of all referral workflows.



3. Click on any status item for more details. The following tables provides more detailed descriptions of some of the LOC eligibility determination and financial eligibility determination statuses that may appear in the Centralized Intake Workflow. As a reminder, Members with SSI only need to meet medical LOC eligibility.

Status	Description	
Level of Care Eligibility Determination Statuses		
Awaiting participant transfer	The application is ready for transfer from Centralized Intake to the appropriate area office. Intake criteria has been met.	
Awaiting further screening by intake specialist	Additional information is needed before the intake process can proceed, such as date of birth or ADLs (activities of daily living) that require assistance.	
Awaiting post eligibility workflow creation routing	The Wait for Determination button (used to hold the application in Centralized Intake until financial determination is made) or Proceed Without Determination button (used to transfer the application to the area office without a financial determination) must be selected to proceed.	
Awaiting assignment to Area Nurse	The application has been transferred from Centralized Intake to the area office and is waiting for a nurse to the assigned to complete the level of care process.	
Awaiting release to the area	Intake processing has been done and the application is waiting to be released to the appropriate area office for the level of care assessment to be done.	
Awaiting financial eligibility update	Medicaid eligibility must be checked and the payment category indicated.	

Status	Description
Awaiting eligibility determination	The applicant is not approved for a Medicaid payment category to receive in home services. A Medicaid eligibility workflow must be created a Medicaid financial application must be completed by the applicant.
Awaiting eligibility workflow creation	The Create Eligibility Workflow button must be selected to start the financial eligibility process.
Financial Eligibility Determination Statuses	
Awaiting application	Medicaid Eligibility is awaiting a completed financial application.
Application received	Medicaid Eligibility has received an application.
Request for more info	Medicaid eligibility has requested additional information from the applicant.
Approve	Medicaid eligibility has determined the applicant to be financially eligible for benefits.
Denied	Medicaid eligibility has determined the applicant to be financially ineligible for benefits.

The preferred method for making referrals is by electronic referral. The electronic referral address is <a href="https://phoenix.scdhhs.gov/cltc">https://phoenix.scdhhs.gov/cltc</a> referrals/new. Those unable to make an electronic referral may call the Centralized Intake phone line at (888) 971-1637.

## **Contact Information**

For questions or additional guidance, please contact:

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