

APPLICATION CENTER UPDATES

Louisiana Medicaid

Spring 2016

Online vs. Paper Application

Louisiana Medicaid requests that every effort be made to submit applications electronically and minimize submission of paper applications. The benefits of online application (OLA) include: greatly reduced processing times (some are automatic), faster payments to Medicaid providers, and rapid reimbursement to application centers. If it is necessary to use a paper application, please indicate the reason on the **BHSF Clearance**.

Tips when completing applications

The contact information on the online application should be completed with information provided by the adult household member regardless of whether they are applying for Medicaid for themselves or other household members. This person is considered the primary contact.

For applicants who are known to Medicaid, the Application ID Proofing Questions screen will not appear. For applicants unknown to Medicaid, ID proofing questions may be completed to continue with the online process. There are three questions that the applicant should be able to correctly answer. If the applicant does not correctly answer these questions, the applicant may:

- ⇒ Contact the data provider, Experian, to verify their identity. The Representative should provide the reference number and the Experian Help Desk number to the applicant. If the applicant correctly verifies their identity, they may resume the application by providing their Application ID Number.
- ⇒ If the applicant cannot verify their identity, the Application Center Representative may continue the online application process, but they must advise the applicant that Medicaid may require additional information.

The following information must be answered for each person listed on the application: tax-filing status, pregnancy questions, health insurance coverage questions, disability status.

Topics Covered

- OLA vs. Paper Application
- Bayou Health
- Disability
- Appendices A-E
- Voter Registration
- Contact Us
- RightFAX

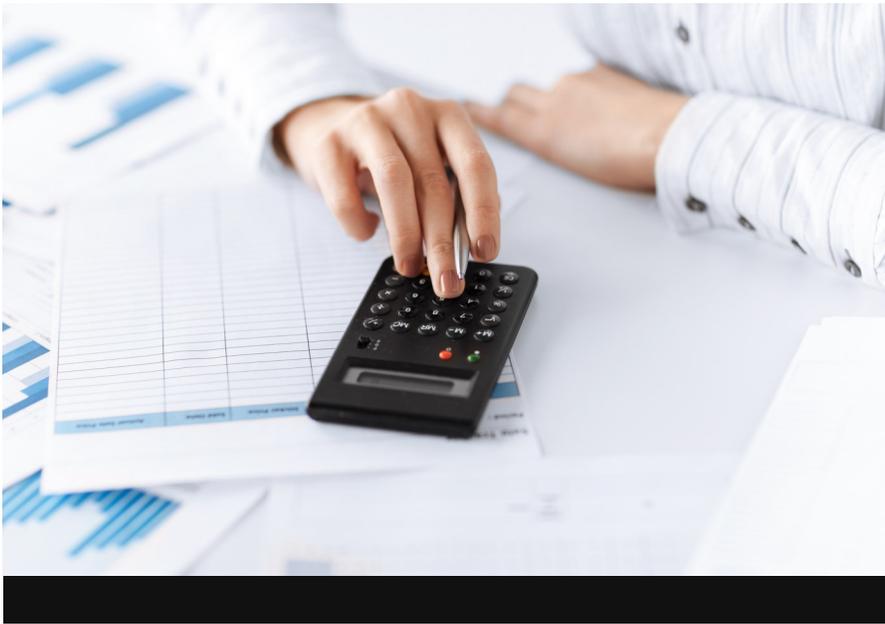
Bayou Health Plans

Encourage the applicant to choose a Bayou Health Plan during the interview process. The applicant has 90 days to change plans if they are not satisfied with the selection. If a plan is not selected on the application, you must indicate that you asked the question, but the applicant chose not to select a plan at this time. You can give them the Bayou Health flyer while they are waiting for the interview. The Bayou Health flyer can be found in the AC Resource Library.

BAYOU HEALTH

1-855-BAYOU4U

bayouhealth@la.gov | bayouhealth.com



Applicant Claiming a Disability

The application asks “Do you have a physical, emotional, or mental health condition that causes limitations in activities?” If the applicant, who is under age 65, replies “yes” to this question, complete the following forms:

1. Complete **Appendix D** (Personal Assets) If the online application is used, use the fillable pdf Appendix D on the Application Center Resource Library and forward completed Appendix D to Medicaid.
2. Complete the appropriate Social Information Interview form:
 - BHSF Form MS** (Social Information Interview for Adults)
 - BHSF Form MS/C** (Social Information Interview for Children)
3. Complete one **HIPAA Form 402P** (Authorization to Release or Obtain Health Information) for each medical provider that the applicant has seen in the last 24 months to obtain consent for Medicaid to request medical records.
4. Complete a **HIPAA Form 202L** (Authorization to Release Health Information) to expedite the medical records collection process any time HIPAA Form 402P is submitted.

NOTE: If the applicant has a Medicare card or is 65 or older, you do not have complete these forms.

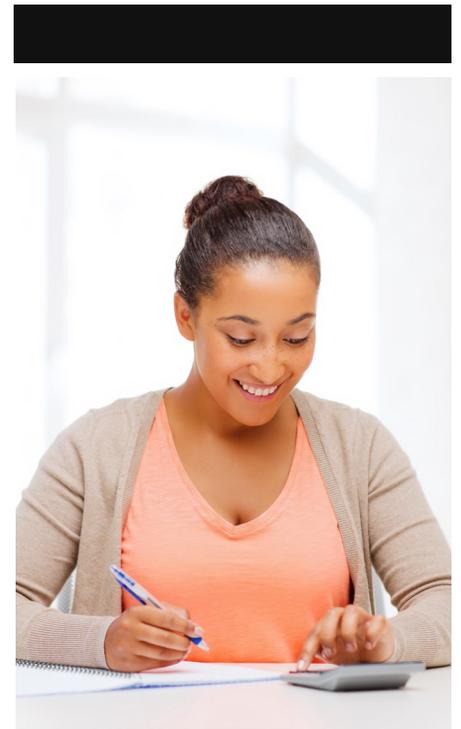
Situational Forms

These forms are completed when the applicant is claiming a disability or is age 65 or older.

BHSF Form INS-LR is completed when the applicant cannot provide a copy of their Life insurance/ Burial policy declaration page and cash surrender value table or Burial Policy during the interview.

BHSF Form Resources is completed if the applicant has a bank account or investment account. In addition, request a copy of the latest bank statement from the applicant.

Reminder: Use the **BHSF Form Verification** to list items that are not provided during the interview.



Appendices

Appendix A

Health Coverage from jobs

Appendix B

American Indian or Alaskan
Native Family Members

Appendix C

Household's Authorized
Representative

Appendix D

Household's Personal Assets

Appendix E

Bayou Health Plan



Appendices on Paper Application

Appendix A asks for health coverage from jobs.

Appendix B asks for more information about American Indian or Alaskan native family members.

Appendix C asks for more information about the household's authorized representative. It also provides space for the Application Center Representative to document the application date, application center representative's name, application center name, and application center ID number.

Appendix D asks for information about the household's personal assets. Complete this appendix when the applicant is an adult who claims to be disabled or is over 65 years of age. When completing an application online, you must complete the paper version of Appendix D.

Appendix E allows the applicant to select a Bayou Health Plan. Provide a copy of the comparison chart of the Bayou Health Plans. If the applicant does not choose a plan, Medicaid will choose for them. You can download the comparison chart on this website: www.bayouhealth.com

Voter Registration

The National Voter Registration Act of 1993 (NVRA) requires the Application Center Representative to:

-  Offer the opportunity to register to vote each time an applicant applies for services or assistance.
-  Assist the applicant in completing the Mail Voter Registration Application (LR-1 & 1M), unless the applicant does not want to register.
-  Ask the applicant if they want to make any changes to their previous registration.
-  Provide the same degree of assistance to complete the Voter Registration Application as their agency provides in completing its own forms.

Forms to complete

Mail Voter Registration Application (LR-1 & 1M) - Send completed original to the Office of the Registrar of Voters in the parish where the applicant resides on a daily basis. A copy is sent to Medicaid along with other application materials. If assistance is provided using geauxvote.com, please send a copy of the summary to Medicaid.

Voter Registration Declaration (NVRADF)—Each and every time an AC Representative offers an applicant the opportunity to register to vote, the AC Representative must document that they offered the opportunity to register to vote by completing the **NVRADF** form. Document **BHSF Clearance** if the applicant refuses to complete the **NRVADF** form.

Registrar of Voters | 1-800-883-2805 | www.geauxvote.com

Contact Us

Customer Service Unit

Referrals

1-877-252-2447

Program Manager

Inquiries about the Application Center such as training needs or transmittal logs:

Keith Pugh

225-342-9860

Applicationcenter.service@la.gov

RESOURCES FOR AC REPRESENTATIVE

Online Application:

<https://ola.dhh.la.gov/Account/Login?type=trusted>

Application Center Resource Library:

<http://new.dhh.louisiana.gov/index.cfm/page/1274>

Applications and forms may be mailed to:

Medicaid Office

P.O. Box 91283

Baton Rouge, LA 70821-9893

Or LaCHIP fax 1-877-523-2987

Bayou Health Plans

Compare extra benefits and choose one plan for each family member

Questions? Call 1-855-BAYOU-4U (1-855-229-6848)

The Louisiana Department of Health and Hospitals (DHH) has tried to make this chart as accurate and complete as possible. However, because it must rely on the various Health Plans to provide this information, DHH cannot guarantee its accuracy. You can learn more about the Health Plans by contacting them directly.

 <p>AEATNA BETTER HEALTH* OF LOUISIANA</p> <p>1-855-242-0802 TTY 711 www.aetnabetterhealth.com/louisiana</p>	<p>Unlimited visits to providers in our network, as needed.</p> <p>Receive gift cards after completing annual adult wellness visits: \$25 wellness visit with STI screening (women 16+); \$15 diabetic dilated eye exam; \$15 woman's mammogram; \$15 diabetic blood testing; \$15 cervical cancer screening; \$25 initial colonoscopy</p> <p>Dental care for adults: twice a year exam and cleaning with fillings and extractions as needed, annual set of X-rays, a \$500 value</p> <p>Eyeglasses for adults: free annual eye exam and \$80 toward eyewear (frames, glasses or contacts)</p> <p>Promise program for pregnant members: complete more visits to earn bigger rewards like a portable crib, play yard, stroller or a diaper-and-wipe package. Plus gift cards: \$10 after first visit within the first 13 weeks of pregnancy; \$10 after your postpartum visit after pregnancy; free circumcisions for newborn boys</p> <p>Ted E. Bear, M.D., Kids Club</p> <ul style="list-style-type: none"> • Weight management program: free pedometer or exercise band after enrolling plus helps kids who are overweight set goals to earn \$15-\$30 gift cards • Free Boy Scout or Girl Scout annual membership <p>Free over-the-counter medicine and products with a doctor's prescription</p> <p>Asthma management program: free one-time in-home environmental assessment; earn \$15 gift cards for managing your asthma</p> <p>Care4Life diabetes coaching program: text reminders, education, goal setting and tracking</p> <p>Nurses, social workers and community health workers to help you get access to care</p> <p>Stop smoking help including medications & coaching</p> <p>Member Services toll free lines with extended hours available 24/7. Nurse Line available 24/7</p>	<p>Unlimited visits to providers in our network, as needed.</p> <p>Dental Care, Adult</p> <ul style="list-style-type: none"> • Two visits each year for exams, cleanings, fillings and extractions. • X-rays (once a year) • \$500 total benefit per year <p>Vision Care, Adult</p> <ul style="list-style-type: none"> • EYE EXAM once every year • Frames and lenses once every year • \$40 allowance toward the cost of nonstandard glasses <p>Healthy Rewards: dollars put onto a gift card to help you earn rewards:</p> <ul style="list-style-type: none"> • \$20 for all well visits from birth to 15 months • \$20 for well-child visit ages 2-9 • \$25 for well-child visit ages 10-20 • \$15 for adult wellness visits • \$10 for diabetic screening • \$10 for sexually transmitted infection screening • \$5 for getting a flu shot <p>Pregnant Members and New Moms:</p> <ul style="list-style-type: none"> • Up to \$75 in gift cards • FREE Portable crib, car or booster seat for going to required doctor visits • FREE community baby showers • FREE circumcisions for boys <p>Community coverage to care: Access to care and services beyond what is traditionally covered by the plan.</p> <ul style="list-style-type: none"> • FREE Membership to Boys & Girls Club for eligible members ages 6-18 • FREE Weight Watchers® meetings. Eligible to members age 18 and older • Up to 250 minutes and unlimited monthly texts on SafeLink® phones • Amerigroup On Call 24/7 hotline 	<p>Unlimited visits to providers in our network, as needed.</p> <p>Adult dental: Two exams with cleaning & one set of X-rays per year. Limited fillings and/or extractions. (Package Value—\$500/year).</p> <p>Adult vision: Exam with \$10 co-pay & \$100 discount on glasses or lenses every 2 years.</p> <p>Circumcisions for newborn boys.</p> <p>Health Care Rewards Program:</p> <ul style="list-style-type: none"> • \$10 gift card for each household completing plan orientation. • \$20 gift card for members over 21 who get a PCP visit in first 90 days & children ages 3-21 who get annual well visit. • Up to \$75 in gift cards for completing expected prenatal & postpartum visits. • FREE Receiving Blanket & matching cap along with "Happiest Baby on the Block" DVD or Book for calling us when you know you are pregnant. <p>Extra Medication Help</p> <ul style="list-style-type: none"> • School Supply - Second inhaler, EpiPen® & diabetes testing meters for school. • Reduced Pharmacy Copayments for Certain Medications on 90 day refills. • New Vaccine for Adults - Tetanus, Diphtheria, Pertussis (Tdap) at no cost & more ability to get Pneumonia & HPV vaccines due to increased provider payments. <p>High School GED Program - Reimbursement of exam fees for getting a high school GED.</p> <p>Cell Phones for Healthcare Needs - FREE cell phones with 250 minutes each month and free text messages and calls to plan.</p> <p>Weight loss support - One initial & follow-up visit with dietician each year for members in "Make Every Calorie Count" Also receive FREE pedometer, journal & tape measure to track success.</p> <p>FREE Support to Stop Smoking - Sponsorship of counseling by March of Dimes Baby & Me tobacco Free in New Orleans & Baton Rouge areas.</p>	<p>Unlimited visits to primary care provider (PCP) for all members. Unlimited visits to specialists with a referral from a PCP.</p> <p>24-hour nurse hotline for health questions</p> <p>For Children</p> <ul style="list-style-type: none"> • \$25 in Bonus Rewards for annual Well-Child Check-Ups ages 3-20 • Extra EpiPen and/or rescue inhaler to keep at school <p>For Pregnant Women: extra support to keep you and your baby healthy</p> <ul style="list-style-type: none"> • Up to \$145 in Bonus Rewards for healthy habits during your pregnancy • Access to our Start Smart for Your Baby program & events for new moms • Circumcision for newborn boys <p>Get Bonus Rewards in your personal, pre-paid account for keeping healthy habits:</p> <ul style="list-style-type: none"> • \$25 for your annual wellness exam • \$10 for each cervical and breast cancer screening • \$10 for your annual flu shot • \$10 for your adult dental exam • And much more <p>Adult Dental Services at Federally-Qualified Health Centers, including exams, cleanings, X-rays and more (2 visits/year)</p> <p>Adult Vision Benefits for eye exams and one pair of frames and lenses each year</p> <p>Personal support and extra services for treating and controlling asthma and diabetes and other conditions.</p> <p>Member Connections to help you access health services, choose a doctor, or find community resources like baby supplies</p> <p>Secure member website and mobile app</p>	<p>Unlimited visits to providers in our network, as needed.</p> <p>\$20 gift card for adults who complete a PCP visit within 90 days of enrollment.</p> <p>\$20 gift card for 1 well-child visit each year between the ages of 1 and 17.</p> <p>\$10 gift card for completing a health risk assessment within 90 days of enrollment.</p> <p>Adult Dental: Routine dental exams, X-rays, fillings, cleanings, and extractions limited to \$500 per year.</p> <p>Adult Vision: Routine eye exam every 2 years and \$100 allowance for frames/lenses every 2 years.</p> <p>Weight Management: Weight Watchers vouchers to attend up to 10 meetings.</p> <p>Adult Pain Management: 6 visits per year to an in-network chiropractor.</p> <p>Annual Asthma Home Assessment for qualified asthmatics with certified in-network asthma educator.</p> <p>Adult Immunizations: Td (Tetanus, Diphtheria), Tdap (Whooping Cough) as deemed necessary.</p> <p>Cell Phone provided if no reliable access to a telephone. 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