



CABINET FOR HEALTH
AND FAMILY SERVICES

Medicaid Waiver Management Application (MWMA)

August, 2024

MWMA Materials

- MWMA is used for all Kentucky Medicaid Waivers
 - <https://www.chfs.ky.gov/agencies/dms/dca/Pages/mwma.aspx>
 - Technical Contact Center (844) 784-5614, option #1
- Providers are responsible for knowing how to use MWMA
- Adobe Learning Manager (ALM)
 - All MWMA Users are to have an account and use the materials
 - URL: <https://learningmanager.adobe.com/kentuckymedicaid>
- Setting up an ALM account
 - Instructions are in the announcement dated 6/25/24
 - To locate the announcement, click on “View Announcements” in the left column of the MWMA home page

Adobe Learning Manager Tips

- **Catalog of materials**
 - When logged in, click on “Catalog” in the column to the left
- **Filters**
 - To be able to locate all documents, remove any filters
- **Sorting**
 - The default when in the catalog is *Most Recommended*, but it can be sorted in alphabetical order (both ascending and descending), and by most recently published
- **Search for documents**
 - Search by a word or phrase. Documents with that word or phrase **in the title** will appear

Adobe Learning Manager Tips

- **Search within documents**
 - Use Ctrl+F to open a search box and enter a word or phrase
- **Back Arrow**
 - While in MWMA, the back arrow at the top of the screen is not to be used, but when in Adobe Learner Manager, the back arrow is how to go back to the catalog after bringing up a document
- **MWMA User Manual**
 - The User Manual provides information about most of the functionality in MWMA. The last few pages of the manual lists additional materials not covered in the manual
- **Document Download Caution**
 - Documents are sometimes updated. If you download documents and save elsewhere, you may end up using outdated information

Announcements


- Emailed to MWMA users based on the email address provided for their MWMA account
- Stored in the “View Announcements” link on the MWMA Home Page
- Listed with the most recent first, but sorting can be done by clicking on a column heading
- Ten announcements are listed on each page
- Best practice:
 - Keep MWMA accounts current to receive announcements timely
 - Utilize “view announcements” for quickly finding previous announcements
- “View Announcements” Reference Guide in ALM

Message Centers



- Two types of message centers
 - MWMA User – accessed from the MWMA home page
 - Person's record – accessed from the Individual Summary Screen
- MWMA User Message Center
 - To let you know something has happened within MWMA regarding someone your agency supports
 - Think of your MWMA message center as your MWMA email

Important: Check MWMA User Message Center every work day

MWMA User Message Center Screen

Message Center 

Search Message/Notification Last 3 Months ▼

First Name	<input type="text"/>	Last Name	<input type="text"/>
Identifier Type	--Select-- ▼	Identifier Value	<input type="text"/>
Notification Date	<input type="text"/> 	To	<input type="text"/> 
Notification Type	--Select-- ▼	<input type="checkbox"/>	Unread Notification

◀ BackResetSearch

Subject	Date Received
---------	---------------

MWMA User Message Center Default

- 10 most recent notifications appears under the search criteria area of the message center screen
 - Before any search criteria is entered
 - Sorted descending – most recent on top
- Search returns results for the past 3 months **unless**:
 - A different length of time is chosen from the dropdown
 - A specific date range is chosen in the search criteria

Notification Date

From

To



MWMA User Message Center Search

- Searches can be done by any combination of:
 - Name
 - Other Identifier (such as case number, SSN, MAID)
 - Date range
 - Type of notification
- Notification archive instructions are on page 41 of the User's Manual

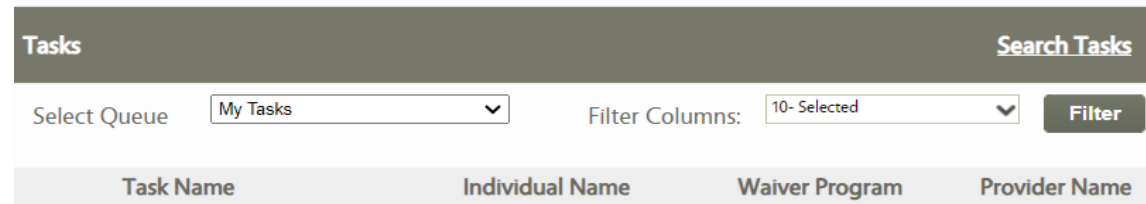
Important: Looking in the message center frequently helps you to quickly know of actions that have been taken or need to be taken regarding people to whom your agency provides services

Message Center of a Person's Record

- Each person who receives waiver services has a Message Center
- Accessed by clicking on the Message Center button on the person's Individual Summary Screen
- Contains a copy of each letter that has been sent to the person from MWMA
- The default is to show the letters sent within the past 3 months
- MWMA users have access to the letters based upon their role
 - Not all users can see all letters

Task Queues

- The default task queue on the MWMA home page is the queue for tasks assigned to the logged in user (titled “My Tasks”)
- To view group tasks, click the down arrow beside “My Tasks” and select the group queue



The screenshot shows a web interface for task queues. At the top, there's a header bar with the word "Tasks" on the left and a "Search Tasks" link on the right. Below this, there's a section for selecting a queue and filtering columns. On the left, it says "Select Queue" followed by a dropdown menu currently showing "My Tasks". To the right of this is a "Filter Columns:" label followed by another dropdown menu showing "10- Selected". A "Filter" button is located to the right of the second dropdown. Below these controls is a table with four columns: "Task Name", "Individual Name", "Waiver Program", and "Provider Name".

- When a person starts a task from a group queue, it will appear in their “My Tasks” queue.
- Tasks associated with a specific person can be seen by using the view tasks button on their Individual Summary screen

Additional Task Information

- To choose what information to see in the tasks table, click on the down arrow beside the word “Filter.” The default is for all of the 19 columns to be selected. Deselect as appropriate then click on filter.
- Re-filtering can be done as desired.
- The MWMA User Manual contains information about tasks on pages 26-38. Additional information includes:
 - Searching for tasks
 - Marking a task as new so someone else can complete it
 - Viewing the history of a task

Inability to Access Waiver Services

- Providers have the responsibility to inform case managers when a person is not utilizing waiver services including the exact date the person left services
- Providers have the responsibility to know the actual dates and amount of services provided and to make sure billing is accurate
- Case managers have the responsibility to utilize MWMA to record when someone is not utilizing waiver services

Triggers for Indicating Out of Service

- When a person is **temporarily** not accessing waiver services, but is expected to return to services within the time allowed by regulations
- Situations include but are not limited to:
 - Admittance to a hospital, nursing facility, or ICF/IDD
 - Incarceration
 - Choosing to leave services for a timeframe that allows for return per regulations

Recording Out of Services in MWMA

- Case Managers have the button to record inability to access services is on a person's program summary screen
- The actual start date to record is the day after waiver services were provided
- An anticipated end date is required

Important:

- **Record the return to services promptly upon return**
- **Selecting “Yes” for “Is the currently enrolled program being closed” is for information only – it does not initiate an action**

60 Day Timeframe

- MWMA was built so that the out of service timeframe is to be no more than 60 days. Therefore, it doesn't allow for an "actual end date" that is past 60 days
- If a person is out of services for longer than 60 days, another "inability" record must be submitted
- Although there is not a comments field, the address field can be used to provide the information that a second record was needed because of not returning to services within 60 days

Important: Only click on the Actual End Date box when you are ready to enter a date.

Program Closures

- Situations that necessitate program closure include when a person:
 - Chooses to no longer receive waiver services
 - No longer lives in Kentucky
 - Has been out of services longer than allowed by regulations
 - Has met level of care for another waiver and wants to switch to it
- The termination date to be entered is the last date waiver services were received
- Program closures will not go through if there are billing claims beyond what was entered as the termination date
- The case manager receives information about the closure in their message center

Individuals without a current PA

- Case Management agencies remain “associated” to individuals (even if they are no longer in a waiver) until they have a different case management agency. Therefore, case management staff can view the information using the **Quick Search** and the default **Search Individual** unless the person has moved to a different case management agency.
- Other providers can view information about individuals for whom they no longer have prior authorization (PA) by clicking on **Quick Search** and then **Search Previously Associated Individual**.

Resume Services Within Waiver Year

- When a person has been closed out of a waiver, a “Resume Services” button is available on their program summary screen for case managers if the current date is within the waiver year a person left the waiver
- Both the Michelle P and SCL waivers were renewed by CMS on May 1, 2024, so the waiver year now runs May through April
- **Example 1:** A person left waiver services and a program closure was submitted with the last date of services in February, 2024. Because May, 2024 began a new waiver year, the resume services button will not be on the person’s program summary screen.
- **Example 2:** A person left waiver services and a program closure was submitted with the last date of services in June, 2024. The resume services button will be on the person’s program summary screen through April 30th, 2025.

Resume Services Outside of Waiver Year

- If the “Resume Services” button is not available to case managers, the next step is to check to see if the person is on the waiting list.
- **SCL:** If the person is on the SCL waiting list, an emergency request can be submitted. If the person is not on the SCL waiting list, a new application will need to be submitted.
- **Michelle P:** Email DDID.info@ky.gov. State whether or not the person is on the Michelle P waiting list and explain the situation for review.

Detailed Instructions

- Inability to Access Services & Program Closures Reference guide
- MWMA User's Manual pages 268-293
- Using Quick Search Reference Guide
- Resume Services Request Reference Guide
- Emergency Requests for SCL Waitlisted Individuals Reference Guide

All of these materials are in the Adobe Learning Manager

<https://learningmanager.adobe.com/kentuckymedicaid>

MWMA as an Incident Management Resource

- In addition to reporting and conducting investigations of individual incidents, it is important to look at incident information in various ways in order to determine and rectify patterns, as well as to see where there has been improvement.
- MWMA has functionality to aid in analysis.
 - Incidents can be exported
 - There are eight incident management reports available to all waiver providers.

Export Incidents

- To export incidents, click on “Other Links” In the left column of the MWMA home page, then click on “Export Incidents”. The Export Incidents screen allows you to enter various parameters.
 - The incident date, type, and a date range are required.
 - The rest of the fields are to allow for the export to be as specific as you would like, including types of incidents, incidents for a specific person, incidents for a type of location, etc.

Providers are encouraged to utilize the export functionality regularly as part of their full incident management activities.

Incident Management Reports

- Eight Incident management reports are available to all providers (not just case management providers). To view the reports, click on “Case Management” in the left-hand column of the MWMA home page and then click on “View Reports”.
- Providers are encouraged to review each report to determine how its use can be incorporated into their full incident management activities.
 - Risk Mitigation and Investigation Report Metrics, and Critical Incident Reports Submitted Within Required Timeframes, are particularly useful for monitoring how well your staff are completing their incident responsibilities.

Incident Management Resources

- Link to Incident Management Trainings, including a demonstration of each report: <https://dbhdid.ky.gov/ddid/im>
- There are 12 Incident Management Documents in the Adobe Learning Manager: <https://learningmanager.adobe.com/kentuckymedicaid>

Individual Summary Hover Text

- When hovering on the blue circle with an “i”, text states what to do to get the information updated

Individual Summary

Individual Information

To update information in this section, please advise the Individual to reach out to DCBS at 1 (855) 306-8959 OR select to Report a Change from Kynect Benefits dashboard. If the Individual has SSI benefits, the [regional SSA office](#) must be contacted to update this information.

Case Information

Waiver Case #

111010217

Medicaid Case #

11201080

Waiver Case Status

Active

Waiver Eligible

Yes

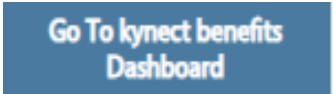
Medicaid

Individual Summary Hover Text

<div>Authorized Representative </div>		<div>View Tasks</div>
Name	Relationship	<div>To update the contact details for this section, please advise the Individual to reach out to DCBS at 1 (855) 306-8959 or navigate to section for Reps, kynectors, & Agents on Kynect Benefits dashboard.</div>
Medicaid/Financial Assistance for		<div>View Capacity Summary</div>
<div></div>		
<div>Case Management Agency - </div>		<div>To update the contact details for this section, navigate to link for Update Profile Information on the MWMA Dashboard or contact your organizational manager.</div>
<div></div>		
Respondent Network	No	

Note that using the “update profile” link does not update the MWMA user information in KOG. Please see the reference guide titled Agency Employee Demographic Changes for updating KOG.

Medicaid information Accessible to Case Managers

- By clicking on  in the Individual Summary Screen, case managers are brought to a person's Medicaid benefits screen.
- They are able to view and print:
 - Medicaid Insurance Card
 - Documents uploaded
 - Notices sent in the mail regarding Medicaid renewals
- They are able to upload documents for DCBS review
- They are also able to update some of the person's information if they do not have a state guardian.

kynect benefits Dashboard

The screenshot shows the kynect benefits Dashboard. At the top, there is a dark blue header with a link to 'Return to Case Supervisor Dashbo...' and a 'Client view:' dropdown. Below this is a blue navigation bar with the kynect logo and links to 'Dashboard', 'Programs', 'Get Local Help', 'Child Care Provider Search', and 'Help & FAQs'. On the right of the navigation bar are icons for email, a user named 'TINA', and a profile icon. A language selector shows 'English (English)'. On the left, a sidebar lists 'Overview' (highlighted), 'Benefits', 'Health Plans', 'Document Center', 'Hearings', and 'Appointments'. The main content area has a background image of a sun and trees. It features a notification bar at the top stating 'Certain actions are restricted for [redacted] Please contact DCBS at 1-855-306-8959 for more information.' Below this is a 'Welcome, [redacted]' message. Three main action cards are displayed: 'View My Information' (View and change key contact information for your case), 'Add Other Benefits' (Apply for other benefits or assistance provided by kynect for which your household may be eligible), and 'Report a Change' (Update your household information to kynect based on the changes). At the bottom, a pink banner asks if the user or someone in their house recently lost Medicaid, encouraging them to take a short survey. It also includes 'ASK' and '?' help icons. A vertical 'Give Feedback' button is on the right edge.

◀ Return to Case Supervisor Dashbo... Client view: [redacted]

kynect benefits

Dashboard Programs ▾ Get Local Help Child Care Provider Search Help & FAQs

Languages: English (English) ▾

Overview

Benefits

Health Plans

Document Center

Hearings

Appointments

! Certain actions are restricted for [redacted] Please contact DCBS at 1-855-306-8959 for more information.

Welcome, [redacted]

View My Information View and change key contact information for your case

Add Other Benefits Apply for other benefits or assistance provided by kynect for which your household may be eligible.

Report a Change Update your household information to kynect based on the changes.

! Have you or someone in your house recently lost Medicaid? We want to hear from you! Take this short survey to tell us more. Also, available in [Spanish](#).

ASK ?

Give Feedback


Reporting a Change

- Click on Report a Change
- Click on modify other information


A screenshot of a 'Report a Change' modal form. The title bar at the top says 'Report a Change' with a close 'x' button on the right. Below the title bar, the text 'Select the type of change you would like to report' is displayed. There are two radio button options: 'Add or Remove Household Member' (which is unselected) and 'Modify other information such as income, expenses, resources, or health' (which is selected with a green dot). Below these options, there is a line of text: 'Interested in applying for other benefits, [click here.](#)'. At the bottom of the form are two buttons: a blue 'Continue' button and a light blue 'Cancel' button.

Update Address or Demographic Information

- Click on Contact information and Select the individual's name:


 Please report changes in a timely manner to avoid interruptions in your benefits or having to repay benefits.

What changes in your household would you like to report? [? Walk Me Through](#)



Contact Information
(such as Phone, Email, and Address)

Select applicable household member(s):



Navigate Through the Change Reporting

- Click on Contact Information

Change Summary

Case#

Please edit the sections below with your changes.

0 of 2 completed

☐ Contact Information

Start →

☐ Review, Sign & Submit


Start

Navigate Through the Change Reporting

- Enter pertinent info

[< Change Summary](#)

Section 1 of 2

Contact Information 

Complete the questions below about contact information.

Email

Primary Phone Number

Ext.

Primary Phone Type

Landline

Cell

Navigate Through the Change Reporting

- Review, sign, submit

Change Summary

Case#

Please edit the sections below with your changes.

1 of 2 completed 

☒ Contact Information

[Edit](#) →

☐ Review, Sign & Submit

[Start](#)

Navigate Through the Change Reporting

BENEFITS APPLICATION

[Change Summary](#)

Signature Page

Terms of Agreement Summary

- 1 I have answered all questions truthfully and to the best of my ability.
- 2 If any changes occur to my situation, I am responsible for reporting them.
- 3 Providing false information may result in penalties.
- 4 Please read and agree to each of the terms. If you do not agree, your application may be affected, and you may be ineligible to receive benefits.

☐ [Read and agree to Application Statement of Understanding](#)

☐ [Read and agree to Medicaid Penalty Warning](#)

☐ [Read and agree to MA 34 - Declaration of Annuities](#)

☐ [Read and agree to Failure to Reconcile Statement of Understanding](#)

I agree to allow the kynect to use my income data, including information from tax returns, for the next 5 years.

☐ I Agree

☒ I Disagree

First Name

MI

☐ Household member does not have a middle initial.

Last Name

Suffix

Select

Date

08/14/2024

Voter Registration

Would you like to register to vote? ⓘ

Yes

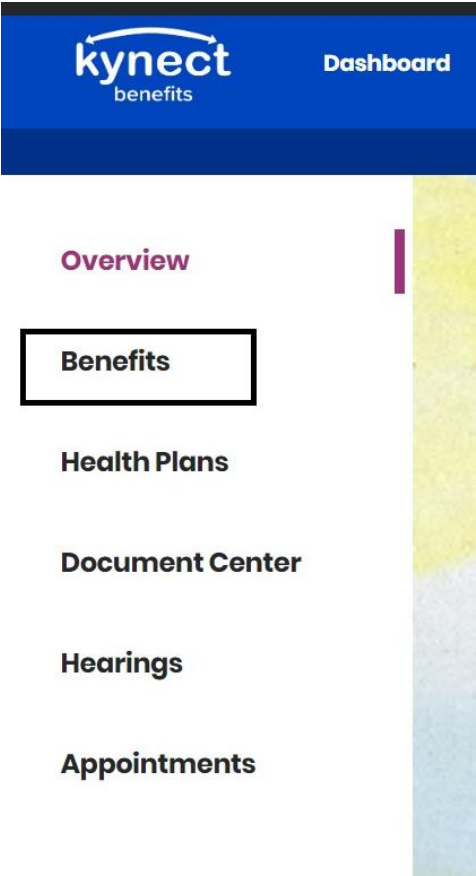
No

Voter Registration Forms will be sent to your mailing address.

Back

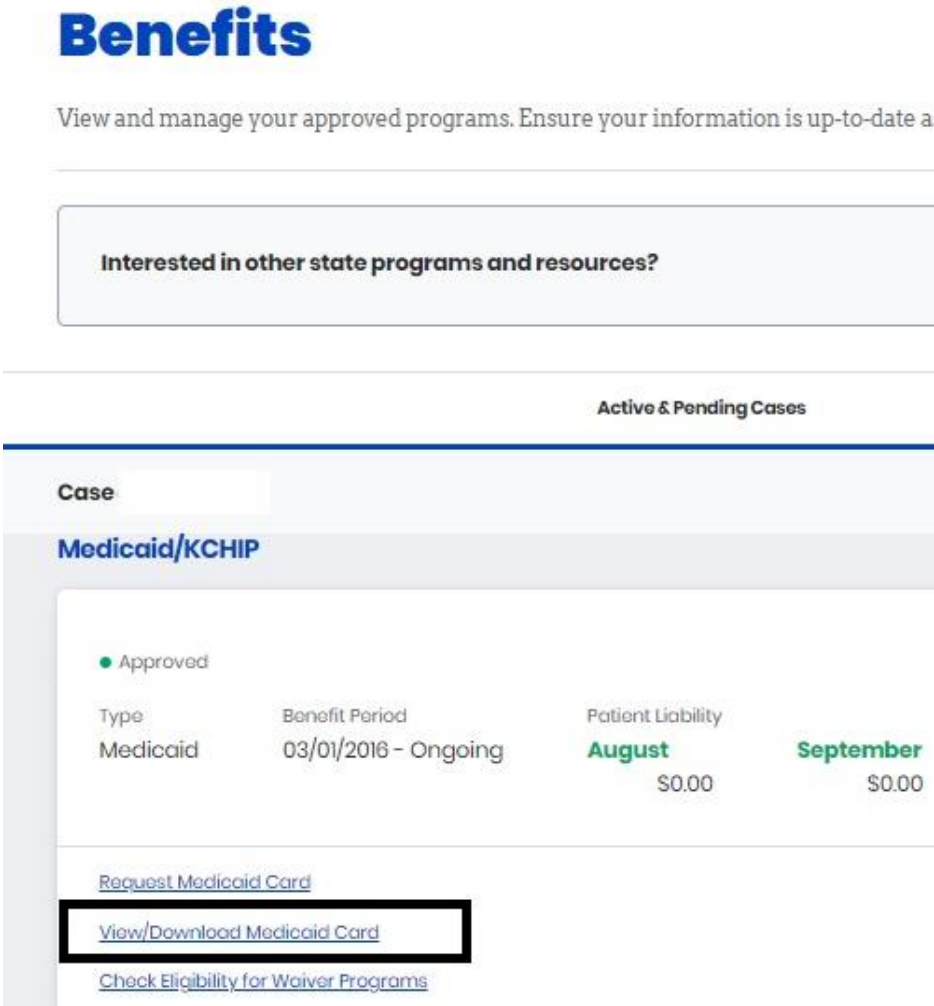
Submit Benefits Application

Access To Medicaid Card



Click on Benefits in the left column of the person's kynect benefits dashboard

Then click on View/Download Medicaid Card



Viewing and Uploading Documents in kynect benefits

- Click on Documents in the left column of the person's kynect benefits dashboard

Document Center

In order to continue with your application, we will need documents to verify the data from your case. After uploading, please allow up to 30 days for your documents to be reviewed.

Files must not be password protected and must not exceed 4MB for PDF, TIF, and TIFF files, or 6MB for JPEG, JPG, and PNG files. Other file types are not accepted.

If you would like to delete a document you have uploaded, select the trash icon. Document deletion can take 5-10 minutes to reflect in the system. If you do not see the trash icon for an uploaded document, this means that the document is being reviewed and cannot be deleted at this time.

Upload your documents here for safe and fast tracking.

The uploaded documents will be sent to DCBS directly. You may alternately choose to mail, fax, or hand deliver your documents to a DCBS office – review [Contact Us](#) for contact information.



KI-HIPP is no longer accepting document verification via fax.

Ready to upload documents we requested?

Upload the requested documents for your household step-by-step.

Upload Document(s)

Uploaded files may not appear instantly.



Give Feedback

kynect Notices and Announcements

- On the person's kynect benefits dashboard, scroll down to see the number of notices and announcements

The screenshot displays the kynect benefits dashboard. The left panel, titled "Benefits →", shows a "Case#:" with a green dot and the word "Active", and a dropdown arrow. Below this are three tabs: "Approved", "Pending Interview", and "Pending Verification". The right panel, titled "Message Center →", is highlighted with a black box. It shows a "To Dos" section with a large blue "0" and an "Unread" section with a large blue "26". Below these are two rows of counts: "0 Due this week" and "25 Notices", and "0 New" and "4 Announcements". At the bottom right of the Message Center, there is a "1 Notification" count, an "ASK" button with a speech bubble icon, and a blue circular button with a white question mark. A vertical purple button labeled "Give Feedback" is on the far right.

View details on your benefits application, cases, and benefits.

View your to-do list and messages.

Benefits →

Case#: ● Active

Approved Pending Interview Pending Verification

Message Center →

To Dos Unread

0 26

0 Due this week 25 Notices

0 New 4 Announcements

1 Notification

ASK ?

Give Feedback

DCBS Letters are Listed as Notices

Overview

Benefits

Health Plans

Document Center

Hearings

Appointments

Message Center

Notices (25)

Messages (1)

Search

You have 25 notices from 4/19/2019.

Notices older than 5 years are not available for download.

Filter (0)

Notice Type

Name

Case/Application Number

Action Due By

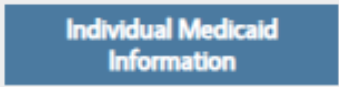
Date Generated

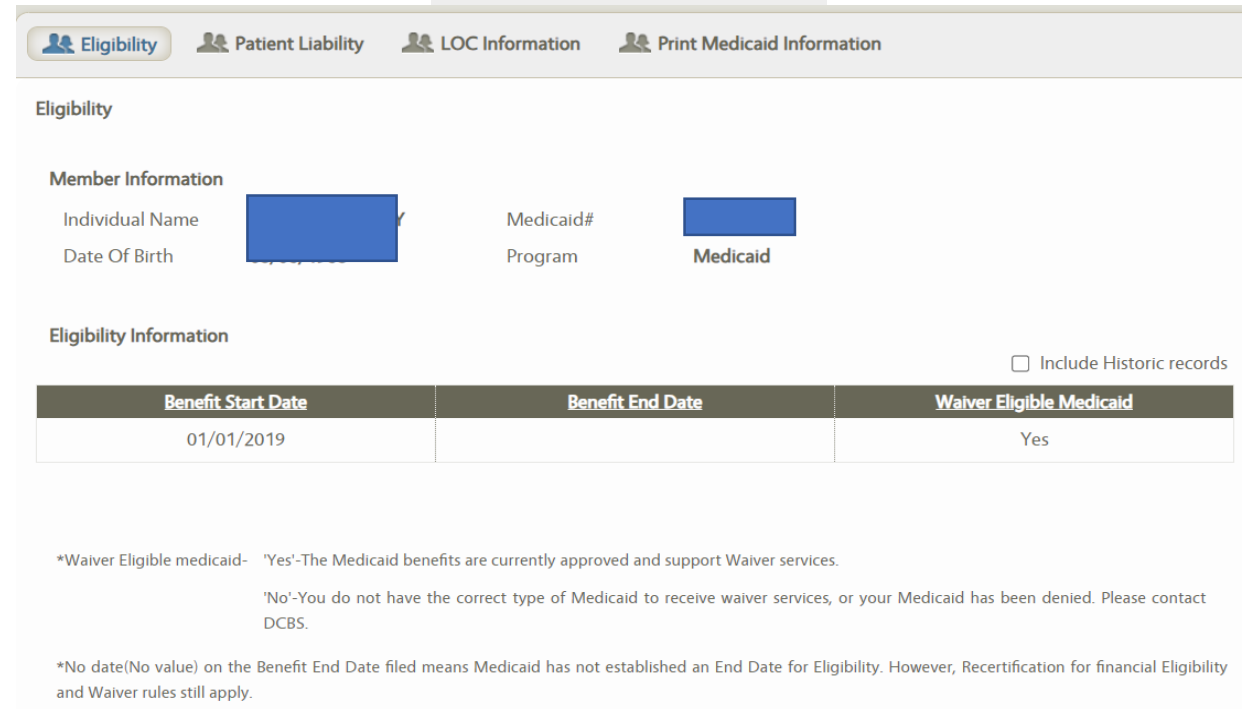
Notice Of Eligibility (KIP-105.1)



Give Feedback

Information Available to Other Providers

- While case managers are the only providers that can make updates to a person's information, all other providers have access to view some of the Medicaid information by clicking on 
- The available information includes eligibility, patient liability, and LOC by clicking through the buttons at the top of the screen



The screenshot shows a web interface for viewing Medicaid information. At the top, there are four tabs: 'Eligibility' (selected), 'Patient Liability', 'LOC Information', and 'Print Medicaid Information'. Below the tabs, the 'Eligibility' section is displayed. It includes a 'Member Information' section with fields for 'Individual Name', 'Date Of Birth', 'Medicaid#', and 'Program'. The 'Program' field is set to 'Medicaid'. Below this is the 'Eligibility Information' section, which includes a table with three columns: 'Benefit Start Date', 'Benefit End Date', and 'Waiver Eligible Medicaid'. The table shows a single row with the values '01/01/2019', an empty field, and 'Yes'. There is also a checkbox for 'Include Historic records' which is unchecked. At the bottom, there are two footnotes: one explaining the 'Waiver Eligible Medicaid' status and another explaining the 'Benefit End Date' field.

Eligibility

Member Information

Individual Name [REDACTED] Medicaid# [REDACTED]
Date Of Birth [REDACTED] Program Medicaid

Eligibility Information

☐ Include Historic records

Benefit Start Date	Benefit End Date	Waiver Eligible Medicaid
01/01/2019		Yes

*Waiver Eligible Medicaid- 'Yes'-The Medicaid benefits are currently approved and support Waiver services.
'No'-You do not have the correct type of Medicaid to receive waiver services, or your Medicaid has been denied. Please contact DCBS.

*No date(No value) on the Benefit End Date filed means Medicaid has not established an End Date for Eligibility. However, Recertification for financial Eligibility and Waiver rules still apply.