

**Kentucky Department for Medicaid Services
Division of Long-Term Services and Supports
Whom to Call Listing for 1915(c) Home and Community Based Services Waivers**

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Question or Issue	How To Resolve	Whom to Contact for Additional Help
Medicaid Eligibility Questions		
Who can apply for Medicaid?	Individuals / Family Members / Authorized Representatives <ul style="list-style-type: none"> Individuals, family members, and authorized representatives can apply for all public benefits, including Medicaid, using kynect.ky.gov. <ul style="list-style-type: none"> Instructional guides and videos for kynect are available at https://www.chfs.ky.gov/agencies/dms/Pages/kynectben.aspx. When an authorized representative is applying on kynect.ky.gov, the appropriate 	For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx

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Medicaid Eligibility Questions		
	<p>forms are generated to confirm the authorized representative's status.</p> <ul style="list-style-type: none"> • Medicaid applications can also be submitted by calling the Department for Community Based Services (DCBS) or by visiting a local DCBS office. • To apply for waiver services: After applying for Medicaid, individuals, family members, and authorized representatives may submit a waiver application using kynect.ky.gov or by contacting their local Community Mental Health Center (CMHC) or Area Agency on Aging and Independent Living (AAAIL) for assistance with the integrated Medicaid waiver application. <p>Case Manager / Application Initiators</p> <ul style="list-style-type: none"> • From the Medicaid Waiver Management Application (MWMA) dashboard, Case Managers / Application Initiators can submit an application on an individual's behalf using an integrated application for Medicaid and waiver services. MWMA prompts you to complete the appropriate data based on the individual's information. <p>NOTE: If the individual has been denied Medicaid services before, they may re-apply at any time. If the individual chooses to apply via kynect, the system walks the individual through the appropriate data based on the</p>	<p>For assistance with a Medicaid waiver application, contact your local CMHC or AAAIL</p> <p>CMHC Listing https://dbhddid.ky.gov/cmhc/default.aspx</p> <p>AAAIL Listing https://www.chfs.ky.gov/agencies/dail/Pages/adrc.aspx</p> <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver</p>

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Medicaid Eligibility Questions		
	individual's information. If the individual chooses to apply for Medicaid via phone or in-person, an interview is required.	<p>(844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
Where do I find information about a pending Medicaid application?	<p>Individuals / Family Members / Authorized Representatives</p> <p>Contact DCBS for Medicaid application status.</p> <p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name, and this takes you to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. Under the Ongoing Applications section, look in the Action Required column for a status. 	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/OfficePhone/index.aspx</p> <p>For technical issues or assistance navigating MWMA, call or email:</p>

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	<p>6. Direct Service Provider/Direct Service Provider Supervisor users may not have access to the kynect Dashboard</p>	<p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p>
<p>Where do I find the letter showing the reason(s) for denial or discontinuance from Medicaid?</p>	<p>Individuals / Family Members / Authorized Representatives Contact DCBS for Medicaid application status.</p> <p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name, this takes you to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. Click on Messages from the kynect Dashboard. 6. Direct Services Provider/Direct Service Provider Supervisor users may not have access to the kynect Dashboard 7. At the Message Center, select the notice with the subject of Notice of Eligibility (Non-MAGI) / Health Benefits Eligibility Notice (MAGI) for denial and discontinuance. 	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p>

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Where can I upload documents for Medicaid?	<p>Individuals / Family Members / Authorized Representatives</p> <p>Use kynect.ky.gov to upload documents for your Medicaid application or contact DCBS. Documents for Medicaid waiver applications can be uploaded using kynect.ky.gov or with the help of a CMHC or AAAIL.</p> <p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter a name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. From the kynect Dashboard in the Request for Information section, click Upload. <p>NOTE: When the document(s) are uploaded, a task is created for DCBS. The task will be worked according to the task due date. In addition to uploading documents, they may also be faxed, mailed, or hand-delivered to the local DCBS office. Once the documents are submitted, DCBS has up to 30 days to process the documents.</p>	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/OfficePhone/index.aspx</p> <p>kynect Document Upload Quick Reference Guide https://www.chfs.ky.gov/agencies/dms/kynect/kbQRGDocumentUpload.pdf</p> <p>CMHC Listing https://dbhdid.ky.gov/cmhc</p> <p>AAAIL Listing https://www.chfs.ky.gov/agencies/dail/Pages/adrc.aspx</p> <p>For technical issues or assistance navigating MWMA, call or email:</p>

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Medicaid Eligibility Questions		
		MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov
Whom can DCBS talk to about your Medicaid case?	<p>DCBS may talk to the following:</p> <ul style="list-style-type: none"> • Applicant • Applicant's spouse • Parents of minor children (under 18) • Power of Attorney • Legal guardian • Statutory benefit payee • Authorized representative as designated by the MAP-14 https://chfs.ky.gov/agencies/dms/MAPForms/MAP14.pdf • Providers <p>NOTE: DCBS can talk to providers prior to Medicaid approval, only if the applicant has completed and signed form DCBS-2 Informed Consent and Release of Information and Records. Per HIPPA requirements, DCBS cannot share information with providers until Medicaid has been approved.</p>	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/OfficePhone/index.aspx</p>
My client has a Medicaid case, but it is not paying for waiver services.	Please be aware there are types of Medicaid assistance that will not pay for waiver services. The three main types are:	For Medicaid application and/or Medicaid financial eligibility assistance, call or email:

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	<ol style="list-style-type: none"> 1. The Medicare Savings Program, also referred to as a Qualified Medicare Beneficiary (QMB), has three categories, SLMB, QI1, and QMB. SLMB or QI1 pays for the Medicare Part B (medical insurance) premium only. QMB pays for Medicare copays and deductibles, but none of them will pay for waiver services. 2. Medicaid expansion for low-income adults is called ADLT Medicaid. ADLT pays for many of the same things as other types of Medicaid assistance, but it will not pay for waiver services. 3. KCHIP III is sometimes called P7. This program provides medical coverage for uninsured children under the age of 19, whose countable household income falls between 160% and 218% of the federal poverty level. KCHIP III does not pay for any long-term care, including waiver services. <p>If an individual qualifies for waiver services and does not have a type of Medicaid assistance that will pay for waiver, they may need to update or re-submit a Medicaid application. Please contact DCBS.</p>	<p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/OfficePhone/index.aspx</p>
What can we do to get the type of Medicaid that will pay for waiver services?	To obtain the type of Medicaid that pays for waiver services, contact DCBS or visit the local DCBS office to report that the individual desires waiver services and needs to make changes to their current Medicaid case to see if	For Medicaid application and/or Medicaid financial eligibility assistance, call or email:

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	they are eligible. The DCBS worker will review the eligibility and recommend the action needed.	DCBS (855) 306-8959 DFS.Medicaid@ky.gov Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx
Checklist for applying for long term care Medicaid	<p>When applying for Medicaid for an individual residing in a nursing facility or receiving waiver services, the following information must be provided to DCBS:</p> <p>Basic Information</p> <ul style="list-style-type: none"> • Full legal name (as shown on the Social Security card) • Social Security Number • Date of Birth • Authorization to apply (not required for a spouse) <ul style="list-style-type: none"> ○ Power of Attorney ○ Legal Guardianship ○ MAP-14 (authorized representative form) <p>NOTE: The MAP-14 can be obtained at any DCBS office or from the DMS website at https://chfs.ky.gov/agencies/dms/MAPForms/MAP14.pdf</p> <p>Income from all sources, including but not limited to:</p>	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx</p>

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	<ul style="list-style-type: none"> • RSDI (Social Security) • Railroad Retirement • Pensions • IRA, 401K, etc. (verification of required minimum withdrawal and any distributions) • Wages, self-employment, farm, or rental income • Long-term care insurance (copy of the policy and verification of any payments) <p>Verification of gross income before any withholdings is required. If the total gross income is above the gross monthly income standard, a Qualifying Income Trust (QIT) will be required. See the MAP-418 for the gross monthly income standard: https://www.chfs.ky.gov/agencies/dms/MAPForms/Map418.pdf</p> <p>Resources (all resources belonging to the applicant and members of their household)</p> <ul style="list-style-type: none"> • Current month's balance and statements for the prior 3 months for all liquid resources, including but not limited to: <ul style="list-style-type: none"> ○ Checking accounts ○ Savings accounts ○ Nursing facility resident accounts ○ Direct Express (or other money cards) ○ Certificates of deposit 	

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	<ul style="list-style-type: none"> • Life insurance policies and current face and cash value • Pre-arranged funeral contracts and verification of funding • Property, including life estates • Annuities (complete copy of all annuities) • Trusts (complete copy of any trusts and verification of funding) • Caregiver or Lifetime care agreements • Promissory notes or land contracts • Home equity plans, including reverse mortgages <p>Health Insurance</p> <ul style="list-style-type: none"> • Medicare Card or Medicare claim number and effective date • Other health insurance cards/information <p>Medical expenses</p> <ul style="list-style-type: none"> • Medicare premiums, including part D premiums • Medicare supplemental premiums • Other health insurance premiums (including vision or dental) <p>Household Members</p> <ul style="list-style-type: none"> • Income 	

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	<ul style="list-style-type: none"> • Resources • Shelter expenses <ul style="list-style-type: none"> ○ Mortgage, along with insurance and taxes ○ Rent ○ Utilities (heating/cooling, water, trash, and phone) <p>NOTE: Please be aware that this is not an all-inclusive list. Based on the information you provide, the DCBS caseworker may require additional verification. You should have the information listed under “Basic Information” above at the time you apply; however, you will have 30 days to provide verification of income, resources, expenses, etc. If you need additional time, please contact DCBS to request an extension. Let them know what efforts you have made to obtain the required verification and the additional amount of time needed.</p>	

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MWMA Waiver Eligibility Questions		
How do I check the status of a waiver application?	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Applications from the right column under Case Action. 5. Click on the Application #. 6. From the Application Tracker, view the Application Status. <p>NOTE: The possible status types are Saved, Submitted, Resubmitted, Complete, and Incomplete.</p>	<p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
What do I do if a waiver application	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 	<p>For technical issues or assistance navigating MWMA, call or email:</p>

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status is showing an incomplete status or an individual has received a waiver Request for Information (RFI)?	<ol style="list-style-type: none"> 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on Update Application from the right column under Case Action. 5. From this screen, you can view what updates are required. If a document is required, on the Document Upload screen, a red X will be present. 6. After uploading all mandatory documents, the red X changes to a green “√”. 7. Click submit, and a task is created for the application reviewer. <p>NOTE: After the status changes to Submitted and all the mandatory document(s) are uploaded, a task is created for the application reviewer. The application reviewer will review the application by the task due date.</p>	<p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
Where do I see why a waiver	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 	For technical issues or assistance navigating MWMA, call or email:

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MWMA Waiver Eligibility Questions		
application was denied?	<ol style="list-style-type: none"> 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Applications, from the right column under Case Action. 5. Click on the Application #. 6. From the Application Tracker, view the Actions Comments. 	<p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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MWMA Waiver Eligibility Questions		
How do I upload a document that pertains to the individual's record?	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Click on View Documents, from the right column under Case Action. 5. From View Documents, select Add Another Document to upload any document about the individual's record. <p>NOTE: Uploading a document through View Document will not trigger any tasks.</p>	<p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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MWMA Waiver Eligibility Questions		
How do I view letters that have been sent via MWMA?	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this to the Individual Summary. 4. Click on Message Center, from the right column under Case Action. 5. From the Message Center, the letters sent to the individual are displayed. 6. The ability to review waiver correspondence is based on the user's profile. Direct Service Provider and Direct Service Provider Supervisor user groups will not have access to all waiver correspondence types, including the LOC determination letter. 	<p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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MWMA Waiver Eligibility Questions		
I do not have a task. How do I upload a reassessment?	Case Manager Please contact the MWMA Technical Contact Center if a task is needed, and no task has been created for the case.	For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov
What should I do if I see Pending Medicaid Eligibility for Waiver Enrollment as the Program Status?	Case Manager <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Click on Individual Name; this to the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. From the kynect Dashboard in the Request for Information section, upload all documents listed in this section. 6. If no documentation is needed, the individual may need to reapply or contact DCBS for their Medicaid status. <p>NOTE: Medicaid eligibility information is also sent to the individual in the "Waiver Level of Care Determination" Letter generated by MWMA.</p>	For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency: Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver



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Level of Care Questions		
<p>Where do I see why I received a Lack of Information (LOI) for a level of care?</p>	<p>Case Manager</p> <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Task, click start for LOI task. 2. From the Level of Care Assessment Results Summary, view the Assessment Activity section for comment. 3. Complete the “Level of Care” process based on the request from CHFS. <p>MWMA mails a letter for lack of information to the individual at the address listed on the Individual Summary Screen. If any of this information is incorrect, please have the individual contact DCBS to update their contact information.</p> <p>Case managers may view an electronic copy of the letter under the Message Center, under Case Action.</p>	<p>To update the contact information on file with Medicaid:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>For level of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589</p>

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Question	How To	Who to Contact for Additional Help
		HCBInquiries@ky.gov Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov
Where do I see why the LOC was denied?	Case Manager <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; this takes you to the Individual Summary. 4. Under the Waiver Program Information section, the Program Status shows Level of Care Not Met. 5. Click on Assessment History from the right column under Case Action. 6. From View Assessment, Click on the arrow () next to the appropriate Program Assessment. 7. Click on the arrow () next to the appropriate Assessment Type with the most recent assessment date. 8. Click on View Details to see the Assessment Activity section for comments on why the LOC was denied. <p>NOTE: If the individual is associated with a case manager, then the case manager receives a notification under their</p>	<p>For level of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589</p>

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	<p>Message Center for this status: Assessment / Reassessment Not Met for Individual.</p>	<p>HCBIquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
<p>Where do I see the status after I have submitted a LOC request in MWMA?</p>	<p>Case Manager</p> <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name, this takes you to the Individual Summary. 4. Under the Waiver Program Information section, the Program Status shows the status. <p>NOTE: Before the review is complete, the status shows Pending LOC determination, and after the review is completed, the possible status types are the following:</p> <ul style="list-style-type: none"> • Level of Care Pending LOI • LOC Not Met • Pending Medicaid Eligibility for Waiver Enrollment with approved LOC Dates <p>NOTE: If the individual is associated with a case manager, then the case manager receives a notification under their Message Center for these two statuses only: LOC Met / Not Met for an Individual.</p>	<p>For level of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIquiries@ky.gov</p>

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		<p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
<p>How do I upload a document in response to an LOI request for more information?</p>	<p>Case Manager</p> <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Task, click start for the Lack of Information task. 2. From the Level of Care Assessment Results Summary, view the Assessment Activity section for comment. 3. Click Next on the Level of Care Assessment Results Summary. This action takes you to the Diagnosis section. If information is needed, then update this section. 4. Click Next to go to the Documents Upload. 5. From the Documents Upload, upload required documents. 	<p>For level of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIquiries@ky.gov</p>

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		<p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
<p>Whom do I call if my LOC dates are wrong in MWMA?</p>	<p>Case Manager Contact the Kentucky Utilization Management Call Center if the LOC dates are incorrect and need to be corrected. Please be prepared to provide the participant information, the waiver type, the dates currently given for LOC, and the corrected dates.</p>	<p>For level of care questions: Carewise Health (800) 292-2392</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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Question	How To	Who to Contact for Additional Help
Plan of Care Questions		
<p>Where do I see the status after I have submitted a Person Centered-Service Plan (PCSP) request for MWMA?</p>	<p>Case Manager</p> <p>From the MWMA Dashboard, under the Plans of Care section, is where you can see the status.</p> <p>NOTE: The possible statuses are the following:</p> <ul style="list-style-type: none"> • Draft (Plan has not been submitted by CM/CS) • Current (Plan is approved) • Current-Pending Start Date (Plan start date is after the current date) • Pending Supervisor Review (Plan is with case supervisor) • Pending Review (Plan is with CHFS) • Pending CMA Review (Plan is with CMA) • Pending Reconsideration (Reconsideration review is pending) • Revisions Requested by Supervisor (CS needs additional information) • Revisions Requested by Plan Reviewer (CHFS needs additional information) • Revisions Requested by CMA Reviewer (CMA needs additional information) <p>NOTE: A notification is sent to the case manager's Message Center for the following status (Current and When Submitted by Supervisor).</p>	<p>For plan of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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<p>I have sent a PCSP request/modifications. How do I know the status?</p>	<p>Case Manager</p> <p>From the MWMA Dashboard, under the Plans of Care section, the status displays Pending Plan Reviewer Review. The task will be worked by the task due date.</p>	<p>For plan of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p> <p>,</p>

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Question	How To	Who to Contact for Additional Help
<p>Where do I see why I received an LOI (or Revision Requested by Plan Reviewer) for a PCSP?</p>	<p>Case Manager</p> <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Tasks, find Revisions Requested by Plan Reviewer task and then click start. 2. From the Service Details; Select the Radio button for all CM Review Required status. 3. Click View / Edit to go to the Prior Authorization section. 4. Click View Service Comments to see comments under the New Service Comments section to view the reviewer's LOI comments. 5. Make updates needed to the plan per the comments by CHFS and submit. 	<p>For plan of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>

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Where do I see if a PCSP Service(s) is denied?	<p>Case Manager</p> <ol style="list-style-type: none"> 1. From the MWMA Dashboard, you will see the Status under Plans of Care section, under Action click Continue on the individual you want to see which service was denied. 2. From the View Plan Details, click Next until you see Service Details. 3. From the Service Details, select the Radio Button for Not Authorized status. 4. Click View / Edit to go to the Prior Authorization section. 5. Click View Service Comments to see comments under the New Service Comments section for the denial comments. <p>A letter is sent to the individual notifying them when a service is denied.</p>	<p>For plan of care questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
Where do I upload a document(s) in response to an LOI for PCSP?	<p>Case Manager</p> <ol style="list-style-type: none"> 1. From the MWMA Dashboard, under Tasks, find Revisions Requested by Plan Reviewer task and then click Start. 	<p>For plan of care questions: Carewise Health (800) 292-2392</p>

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	<ol style="list-style-type: none"> 2. From the Service Details, select the Radio button for each CM Review Required status. 3. Click View / Edit to go to the Prior Authorization section. 4. Click View Service Comments to see comments under the New Service Comments section for the reason LOI was issued. 5. Continue to click next until you come to Upload Documents. 	<p>For technical issues or assistance navigating MWMA, call or email:</p> <p>MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIInquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
<p>What if a PA needs to be extended?</p>	<p>Case Managers and Providers</p> <p>Contact the Kentucky Utilization Management Call Center.</p>	<p>For prior authorization questions:</p> <p>Carewise Health (800) 292-2392</p>

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Question	How To	Who to Contact for Additional Help
What will happen if a PA letter is not calculated correctly?	Case Managers and Providers Contact the Carewise Health.	For prior authorization questions: Carewise Health (800) 292-2392
Prior Authorization (PA) Questions		
I cannot find/have not received the PA letter.	Case Managers and Providers PAs are viewable in KY Health-Net and MWMA; however, MWMA generates a more user-friendly version. PAs can be viewed in MWMA using the Service Details screen or by generating a PA letter. If a provider wants to view PA information using KY Health-Net, instructions are available at https://chfs.ky.gov/agencies/dms/dca/Documents/painquiryinstructions.pdf .	For prior authorization questions: Carewise Health (800) 292-2392 For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency: Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov

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Question	How To	Who to Contact for Additional Help
		<p>Home and Community Based Waiver (877) 315-0589 HCBIquiries@ky.gov</p> <p>Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov</p>
<p>I do not have a PA letter yet even though services show approved in MWMA.</p>	<p>Case Managers and Providers</p> <p>PAs are viewable in KY Health-Net and MWMA; however, MWMA generates a more user-friendly version. PAs can be viewed in MWMA using the Service Details screen or by generating a PA letter.</p> <p>If a provider wants to view PA information using KY Health-Net, instructions are available at https://chfs.ky.gov/agencies/dms/dca/Documents/painquiryinstructions.pdf.</p>	<p>For prior authorization questions: Carewise Health (800) 292-2392</p> <p>For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.Info@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 or 1915cWaiverHelpDesk@ky.gov</p> <p>Home and Community Based Waiver (877) 315-0589 HCBIquiries@ky.gov</p>

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		Michelle P. and Supports for Community Living Waiver (502) 564-7700 DDID.Info@ky.gov
Patient Liability Questions		
Where do I find how much a participant's patient liability should be?	Case Manager and Provider <ol style="list-style-type: none"> 1. Select Quick Search from the MWMA Dashboard. 2. Search by Identifier Type or enter the name in the First Name / Last Name field. 3. Click on Individual Name; to access the Individual Summary. 4. Click on Go To kynect Dashboard from the right column under Case Action. 5. Click on Messages from the kynect Dashboard. 6. From the Message Center, select the notice with the subject of Notice of Eligibility. 7. Click on Please click here to view your message. <p>NOTE: Contact Provider Inquiry Call Center to see Patient Liability in KY Health-Net. Direct Service Providers / Direct Service Provider Supervisor users may not have access to kynect dashboard.</p>	For technical issues or assistance navigating MWMA, call or email: MWMA Technical Contact Center (844) 784-5614, option #1 MedicaidPartnerPortal.info@ky.gov For billing inquiries: Provider Inquiry Call Center (800) 807-1232
What if patient liability is taken from the incorrect provider?	Provider Patient liability should be taken from the first provider that bills. Contact Provider Inquiry if patient liability is being taken from the incorrect provider.	For billing inquiries: Provider Inquiry Call Center (800) 807-1232

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Question	How To	Who to Contact for Additional Help
Why does the participant show a patient liability when they should not have an amount?	Provider Contact DCBS to clarify the patient liability amount.	For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov
MMIS Claims Questions		
My claim was denied due to a POC segment missing or being invalid.	Provider Contact Provider Inquiry if a claim is denied due to a missing or invalid POC segment.	For billing inquiries: Provider Inquiry Call Center (800) 807-1232
My claim was denied because of no available income on file.	Provider Check to see if a patient liability segment is present or not for the participant. You may contact DCBS. If DCBS states patient liability is present for the participant, then call Provider Inquiry.	For Medicaid application and/or Medicaid financial eligibility assistance, call or email: DCBS (855) 306-8959 DFS.Medicaid@ky.gov Find Your Local DCBS Office https://prd.webapps.chfs.ky.gov/Office_Phone/index.aspx For billing inquiries: Provider Inquiry Call Center (800) 807-1232

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Question	How To	Who to Contact for Additional Help
I need to back out a paid claim and void a service line in the person-centered service plan.	<ol style="list-style-type: none"> 1. Void any paid claims in MMIS 2. Once paid claims are backed out, contact Carewise Health to void the service line in MWMA. 3. Add a new service line to the person-centered serviced plan in MWMA and submit the plan. 	<p>For assistance backing out paid claims: Provider Inquiry Call Center (800) 807-1232</p> <p>To have a service voided from the person-centered service plan: Carewise Health (800) 292-2392</p>
Other Questions		
The participant is in an incorrect benefit plan (Global choices vs. Optimum Choices).	<p>Case Manager</p> <p>All waiver participants MUST have an active LOC date, patient liability, and a benefit plan. If the waiver participant has each of these and continues to have issues, contact the waiver operating agency.</p> <p>All benefit plans, including Global, Optimum, and Comprehensive, will work, as long as the participant has a patient liability and active LOC.</p> <p>If the participant plan changes, please check on the LOC dates and patient liability first. If the only issue is with the benefit plan, please contact DCBS.</p>	<p>For Medicaid application and/or Medicaid financial eligibility assistance, call or email:</p> <p>DCBS (855) 306-8959 DFS.Medicaid@ky.gov</p> <p>For waiver policy questions, case-specific issues, or other non-technical inquiries, call or email the appropriate waiver operating agency:</p> <p>Acquired Brain Injury, Acquired Brain Injury Long Term Care, or Model II Waiver (844) 784-5614 1915cWaiverHelpDesk@ky.gov</p>

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Provider Enrollment related questions	Contact Provider Enrollment for questions related to Medicaid Partner Portal Application (MPPA) – provider application questions or provider number maintenance or revalidation.	<p>For provider enrollment questions, call:</p> <p>MPPA (877) 838-5085 https://www.chfs.ky.gov/agencies/dms/provider/Pages/providerenroll.aspx</p>
Provider number-related questions.	Contact the Provider Inquiry for provider number-related questions.	<p>For billing inquiries:</p> <p>Provider Inquiry Call Center (800) 807-1232</p>
Provider number incorrect on PA Letter.	Email the 1915(c) Waiver Help Desk if the provider number is incorrect on the PA letter that was received. Please provide the PA number and the correct provider number.	<p>For prior authorization questions:</p> <p>Carewise Health (800) 292-2392</p>
Electronic Visit Verification (EVV)		<p>Please see the DMS EVV website for contact information for EVV support.</p> <p>https://bit.ly/KYEVVWebsite</p>