09 Referral to the AHCCCS SSI/MAO Unit – Full Service Referrals

REVISION 19 (01/01/12 - 03/31/12)

Aged, blind, or disabled participants are referred to AHCCCS when they are not eligible for any MA category administered by FAA.

The requirements for a referral are any the following:

- Age 65 and over
- Under age 65, and any of the following:

Blind

Diagnosed with End Stage Renal Disease (ESRD)

Disabled (See FES Referrals-Blind or Disabled)

Receiving dialysis

Acute leukemia

Receiving Social Security Disability (SS DS)

Determine the participants potentially eligible for a referral to AHCCCS by one of the following:

- Questions on the application that indicate a participant claims to have a disability that last 12 months or more or results in death
- Receiving SS DS
- Discussion with the participant when appropriate
- Doctors statement claiming disability for 12 months or more

To refer these participants to the AHCCCS SSI/MAO Unit for an eligibility determination, complete the following:

- Key the date the application is received in the INTERVIEW/CONTACT DATE field on INDA
- Key Y in the INTERVIEW/CONTACT COMPLETED field on INDA
- Key IN in the MA PT field on SEPA
- Key the appropriate citizenship or qualified noncitizen status code in the CI field on IDCI

 Key Y in the DS MA field on SSDO next to the participant who is potentially eligible for a referral to AHCCCS

NOTE Do not key Y for participants 65 and over

- Authorize MA and send the appropriate notice when MADA displays PASS in the RESULT field
- Key your PCN in the AUTH PCN field, when MADA displays FAIL in the RESULT field and AR in the DEN/CL REASON field

NOTE AZTECS automatically send the X465 notice to the PI. The X465 notice informs the PI of the referral to AHCCCS

 <u>Upload(g)</u> into OnBase the following documents by close of business one <u>workday(g)</u> after keying AZTECS:

Application for MA

Interview guide (FA-001B), when available

All supporting documents used in the determination

WARNING

Do NOT DELAY the referral when completing an MA eligibility determination for other participants listed on the application.

- Document CADO or the CADO Extension Form (CEF) with the actions taken
- When possible, also verbally inform the participant that the application is being referred to AHCCCS, and that AHCCCS may contact them for additional information, which the participant will need to provide to AHCCCS