

SALISH BHO

ADMINISTRATION POLICIES AND PROCEDURES

Policy Name: MEDICAID/TXIX ELIGIBILITY VERIFICATION Policy Number: 2.05

Reference: State Contract, 42 CFR 438; 42 CFR 435.911;

42 CFR 435.916

Effective Date: 5/2000

Revision Date(s): 3/2014; 3/2016; 7/2017; 6/2018

Reviewed Date: 3/2016; 7/2017; 6/2018

Approved by: SBHO Executive Board

CROSS REFERENCES

Policy: Corrective Action Plans

PURPOSE

To ensure the Salish BHO (SBHO) network providers verify Medicaid/TXIX eligibility as part of the Intake or Assessment Authorization process and at the time each service is provided. Verification must be performed prior to an intake or assessment from SBHO provider and prior to each outpatient service.

PROCEDURE

SBHO providers are contractually required to check for Medicaid eligibility at the time of intake or assessment. Both substance use disorder and mental health providers must manually look up the individual in the State Health Care Authority's Provider One data base at the mental health intake or substance use disorder assessment.

In addition to the intake or assessment requirement, SBHO providers are contractually required to check Medicaid status at the time of each outpatient visit.

For SBHO contracted substance use disorder providers:

 Agencies must check Medicaid status at the time of service provision by looking up eligibility status in Provider One.

For contracted mental health providers:

- Weekly, Kitsap Mental Health Services imports Medicaid eligibility files into Profiler, the common Electronic Medical Record.
- Service providing agencies can check Medicaid status at the time of service provision by:
 - Reviewing Medicaid eligibility in Profiler; or
 - Looking up eligibility status in Provider One

MONITORING

This policy is mandated by contract and statute.

- 1. This Policy is monitored through use of SBHO:
 - Annual SBHO Provider and Subcontractor Administrative Review
 - Utilization Management Committee and standard reports data
 - Annual Fiscal Review- Federal Block Grant projects
- 2. If a provider performs below expected standards during any of the reviews listed above a Corrective Action will be required for SBHO approval. Reference SBHO Corrective Action Plan Policy.