

**County of San Diego, Health and Human Services Agency (HHSA)
County Medical Services Processing Guide**

Denial of CMS Applications

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Purpose:

The purpose of this Processing Guide is to provide workers instructions for denying CMS applications.

Background:

A denial occurs when the applicant/beneficiary is determined **not** to be eligible to CMS benefits.

Policy:

The worker enters the applicant/beneficiary information directly into the CMS IT system to determine the applicant's/beneficiary's CMS eligibility. When the applicant/beneficiary is determined **not** to be eligible to CMS benefits, the denial NOA is sent to inform the applicant/beneficiary of the denial and reason for the denial.

Actions:

Failure to Provide

Prior to denying an applicant for failure to provide essential information, the worker will:

Step	Action
1	Ensure the applicant was given the required timeframe to provide as outlined in 02.06.
2	Review the applicant's ability to obtain the required verifications and offer assistance in obtaining the verifications, as necessary, prior to denying the case.
3	Deny the applicant's application for failure to provide if the required verifications have not been provided by the second deadline, and good cause (02.01) has not been determined.

Note: In addition to following the 10/10 timeframe as outlined in 02.06, the worker shall provide assistance as outlined in 02.06.

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Applicant/Beneficiary Provides After the NOA Denial Date

A. The worker takes the following step when verifications are received within 10 calendar days of the denial notice date.

If...	Then the worker must...
some verifications are still missing,	advise the applicant either verbally or in writing the denial will stand and they may reapply.
all verifications are provided but ineligibility exists for a different reason,	<ul style="list-style-type: none"> • rescind the denial; and • re-deny the application

B. When verifications are received within 10 calendar days of the denial notice date **AND** the applicant/beneficiary is requesting for more time, the worker will take the following actions to process the case.

Step	Action						
1	Evaluate the applicant's reason for requiring additional time.						
	<table border="1"> <thead> <tr> <th>If...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>it appears that the applicant is making a good faith effort to obtain the verifications, and/or the delay is beyond their control,</td> <td>go to Step 2</td> </tr> <tr> <td>there is no good cause for an extension,</td> <td>go to Step 4</td> </tr> </tbody> </table>	If...	Then...	it appears that the applicant is making a good faith effort to obtain the verifications, and/or the delay is beyond their control,	go to Step 2	there is no good cause for an extension,	go to Step 4
	If...	Then...					
it appears that the applicant is making a good faith effort to obtain the verifications, and/or the delay is beyond their control,	go to Step 2						
there is no good cause for an extension,	go to Step 4						
2	Rescind the denial and allow additional time.						
3	Review application at set due date.						
	<table border="1"> <thead> <tr> <th>If...</th> <th>Then...</th> </tr> </thead> <tbody> <tr> <td>Verifications are not provided</td> <td>go to Step 4</td> </tr> <tr> <td>Verifications are provided,</td> <td>approve or deny as appropriate</td> </tr> </tbody> </table>	If...	Then...	Verifications are not provided	go to Step 4	Verifications are provided,	approve or deny as appropriate
	If...	Then...					
Verifications are not provided	go to Step 4						
Verifications are provided,	approve or deny as appropriate						
4	Deny case appropriately						

Note: Document the verbal contact in case comment or scan a copy of any written contact in the case file.

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Excess Property “SpendDown” Procedures

The applicant has 30 days from the date of the denial notice to pay allowable expenses and to submit receipt(s) to the worker in order to be within CMS property limits.

If the receipts are...	Then the...
Submitted within 30 days	Worker will: <ul style="list-style-type: none"> • Verify that the property excess has been spent correctly • Determine that the applicant is now within property limit • Note in the case comments “spenddown” receipts in the amount of \$_____ received • Rescind the denial
Not submitted within 30 days	Denial stands

Reasonable Attempts

When denying case, for loss of contact, the worker must make reasonable attempts to contact the applicant/beneficiary. To determine reasonable attempts the worker must take the following actions:

Step	Action	
1	Attempt to contact the client by phone. If client does not have a telephone, proceed to Step 2.	
	If...	Then the worker will...
	Contact is made	<ul style="list-style-type: none"> • Confirm that the client has not moved • Document contact in the case comments • No further action is needed
	There is no answer	<ul style="list-style-type: none"> • Deny/discontinue the case and • Document contact attempt in case comments
	Number has been disconnected	
Person answering the telephone confirms that client has moved and left no forwarding address		
2	Send a letter to client requesting that the client contact the worker within 10 days to confirm his/her whereabouts.	
	If client...	Then...
	responds and confirms his/her whereabouts	<ul style="list-style-type: none"> • Document contact in case comments and • No further action is to be taken
Does not respond to letter within 10 days	<ul style="list-style-type: none"> • Deny/discontinue the case and • Document in case comments the attempt to contact by mail & clients failure to respond 	

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Request for Withdrawal

Processing a request for withdrawal

When the request is...	Then the worker will...
Written	<ul style="list-style-type: none">• Deny the case;• Send the appropriate NOA to the client; and• Save the written request, along with the NOA, in the CMS case record.
Oral	<ul style="list-style-type: none">• Ask that the request be made in writing;• Document that an oral request has been received and written confirmation has been requested;• Deny the case; and• Send appropriate NOA

Note: It is not necessary to wait for the written request before the case is denied. When the written request is received, it is to be saved in the CMS case record.

If the applicant fails to return a written request for withdrawal and later disputes the oral request, and there is no other basis for the denial, the worker will immediately rescind the denial action, otherwise, the denial will be considered valid.

Sunset Date:

This policy will be reviewed for continuance by 04/30/2019.

Release Date:

April 04, 2016