

BROADCAST DMAS-41

DATE: April 24, 2019

TO: Local Directors and medical assistance staff

FROM: Kelly Pauley, Manager, Eligibility and Enrollment Services Division, Department of Medical Assistance Services

SUBJECT: MAGI Adult and Long Term Care Services and Supports

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The following acronyms are used in this broadcast:

DMAS – Department of Medical Assistance Services
LDSS – Local Department of Social Services
LTSS – Long Term Care Services and Supports

The purpose of this broadcast is to remind LDSS staff who determine eligibility for Medicaid that patient pay policy in M1470 does not apply to MAGI Adults. Effective January 1, 2019, The MAGI Adult (or “Medicaid Expansion”) group became eligible for full Medicaid coverage including LTSS if all eligibility requirements are met. **MAGI Adults have no responsibility for patient pay.** If an individual receiving LTSS loses eligibility in the MAGI Adults covered group and is eligible in another full coverage group, patient pay will policy will apply. The reverse is also true. If an individual eligible for LTSS in a full coverage group with a patient pay become eligible as a MAGI Adult and VaCMS does not send the transaction to MMIS to end the patient pay, the Eligibility Worker must send a Patient Pay Correction request to DMAS to do so. VaCMS will not send patient pay to MMIS for these individuals.

Please contact your Regional Medicaid Consultant if you have questions about this broadcast.