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DOCUMENT HISTORY LOG

STATUS ¹	DOCUMENT REVISION ²	EFFECTIVE DATE	DESCRIPTION ³
Baseline	1.0	February 5, 2007	Initial version of Chapter 11.1, Medicaid Estate Recovery Program – STAR+PLUS Program
Revision	1.1	December 1, 2009	Chapter 11.1, Medicaid Estate Recovery Program – STAR+PLUS Program is revised to add applicability statement and section headings.
Revision	2.0	March 15, 2015	<p>Revision 2.0 applies to contracts issued as a result of HHSC RFP numbers 529-10-0020, 529-12-0002, and 529-13-0042; and to Medicare-Medicaid Plans (MMPs) in the Dual Demonstration.</p> <p>Section I “Applicability of Chapter 11.1” is modified to add the Medicare-Medicaid Dual Demonstration.</p> <p>Section II “Purpose” is modified to change “1915(c) Nursing Facility Waiver” to “Home and Community Based Services (HCBS) authorized under the 1115 waiver.”</p> <p>Section IV “Policy” is modified to change “HMO” to “MCO;” to change “1915(c) Nursing Facility Waiver services” to “HCBS STAR+PLUS Waiver (SPW) services;” and to change “STAR+PLUS Support Unit (SPSU)” to Program Support Unit (PSU).”</p>
<p>¹ Status should be represented as “Baseline” for initial issuances, “Revision” for changes to the Baseline version, and “Cancellation” for withdrawn versions</p> <p>² Revisions should be numbered according to the version of the issuance and sequential numbering of the revision—e.g., “1.2” refers to the first version of the document and the second revision.</p> <p>³ Brief description of the changes to the document made in the revision.</p>			



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I. Applicability of Chapter 11.1

Applicability
Modified by
Version 2.0

This chapter applies to Managed Care Organizations (MCOs) participating in the STAR+PLUS Program (including the Medicare-Medicaid Dual Demonstration).

II. Purpose

Purpose
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Version 2.0

The Medicaid Estate Recovery Program (MERP) is the program that allows the state to file a claim against the estate of a deceased Medicaid recipient to recover Medicaid related costs. More information is available at the Texas Department of Aging and Disability Services (DADS) website listed below.

http://www.dads.state.tx.us/services/estate_recovery/index.html

For purposes of STAR+PLUS, Members receiving Home and Community Based Services (HCBS) authorized under the 1115 waiver and Members who enter a nursing facility will be subject to the MERP requirements.

III. Authority

The program was established in accordance with federal law 42 U.S.C. §1396p(b)(1), Texas Government Code §531.077, and 1 Texas Administrative Code Chapter 373.

IV. Policy

Policy
Modified by
Version 2.0

The state will only seek recovery from the Member's estate of the premiums paid to the MCO, but there will be no financial impact directly to the MCO. There also will be no financial impact on the MCO's Network Providers. The only claims that will be filed are related to the premiums paid to the MCO on behalf of the Member. There will be no recoupment of payments from the providers of service.

1. Members who enter a nursing facility will be provided information about MERP and will be asked to sign Form 8001, MERP Receipt Acknowledgement Form, by the HHSC Medicaid Eligibility staff.
2. Members who are requesting HCBS STAR+PLUS Waiver (SPW) services will be provided information about MERP and will be asked to complete Form 8001, MERP Receipt Acknowledgement Form, by the MCO representative



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conducting the assessment for waiver services. Note: Even though the HHSC Medicaid Eligibility staff has asked Members to sign Form 8001, the MCO also must ask the Members to sign the form as evidence that the MCO has met its responsibility to inform the Members about MERP.

3. The MCO will obtain the signed Form 8001, MERP Receipt Acknowledgement Form, or will document that the information was shared with the Member but the Member refused to sign the form. The MCO will retain the form or the documentation in the Member's case record on file at the MCO. The application for HCBS SPW services must continue even if the Member refuses to sign the form.
4. The MCO must notify the Program Support Unit (PSU) of a Member's death if the Member was receiving HCBS SPW services or was residing in a nursing home.