

Act 150 Annual Reevaluation and Level of Care Redetermination Procedure

1. Within sixty (60) days prior to the participant's last Assessment date, the Service Coordinator (SC) makes a request to the local Area Agency on Aging (AAA) to complete a level of care determination for the Act 150 participant.
2. The AAA provides the outcome of the level of care determination to the SC. A determination of nursing facility clinically eligible (NFCE) indicates a participant is functionally eligible.
3. Upon receipt of a NFCE level of care determination, the SC assists the participant in completing a MA Long Term Care Application (600L) and collecting necessary financial information.
4. Upon completion of the 600L and collecting financial documentation the SC submits a referral to the PA Independent Enrollment Broker (IEB).
 - The referral should be submitted via email to PAIEBSupport@maximus.com
 - The email subject should state "ACT150 Program to CHC Waiver Transfer"
 - The email should include the name and MCI number of the participant and include the following attachments:
 - Level of Care Determination
 - PA 600L and financial information
5. Upon the receipt of the referral the PA IEB will
 - Contact the participant to provide Choice Counseling
 - Submit the PA 600L financial information and Home and Community Based Services (HCBS) Eligibility/Ineligibility/Change Form (PA 1768) to the County Assistance Office (CAO).
6. The CAO completes the financial eligibility determination and issue a PA 162 eligibility notice indicating the determination.
 - Financially ineligible
 - The participant will continue enrollment in the Act 150 Program
 - Financially eligible
 - The IEB will notify the SC and Office of Long-Term Living (OLTL) Enrollment that the participant has been determined eligible for the Community HealthChoices (CHC) waiver.
7. OLTL Enrollment Unit contacts the SC to complete a Waiver Program Transfer to close the Act 150 record and facilitates the transfer of services to the CHC-Managed Care Organization (MCO) for continuity of care.

Please note: system processing occurs within one business day of the CAO processing the waiver application which is when the MCO receives notification of the Enrollment. Outreach by OLTL to coordinate the transfer will occur within 2 business days of system processing.