

Information Memorandum Transmittal Aging and People with Disabilities



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Number: APD-IM-20-081

Issue date: 7/29/2020

UPDATED

Topic: Long Term Care

Due date:

Subject: Buckley Notice Updates

Applies to (check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County Mental Health Directors |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B | <input type="checkbox"/> Health Services |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs | <input type="checkbox"/> ODDS Children's Intensive In Home Services |
| <input type="checkbox"/> County DD program managers | <input type="checkbox"/> Stabilization and Crisis Unit (SACU) |
| <input type="checkbox"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (<i>please specify</i>): |
| <input type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Update is in Red

Message:

The "Notice of Service Eligibility Review" (otherwise known as the "Buckley Bill Notice", form 70B) has been modified to include revised notice language and daily mailings (in order to ensure the notice is issued timely).

With the implementation of the ONE system, the following changes are in production as of 07/06/2020:

- Updated notice language. The updated notices are available on the [CM Tools/Assessments Tools page](#) and will be updated the forms server. Previous versions of the notice should no longer be utilized.
 - **The Russian translation is now available on the Case Management Tools website.**
- Notices will continue to be sent in English and Spanish.
 - If the consumer has a language code other than English or Spanish, the English version will be sent.
 - System updates in the future will allow for notices to issue in additional languages. The translations will also be provided on the [CM](#)

[Tools/Assessments Tools page](#) when they are finalized.

- Notices issued by the system will be available for review by branch in FileZilla. They will be located in the same folder where vouchers are generated. The issuance will no longer be tracked in LOGI.
- The notices will be created by the system in a **nightly batch**, run each business day, for consumers with benefit service end dates that are 45 days or less in the future (as indicated in Oregon ACCESS and the mainframe screen SELG).
 - This includes benefits that are modified to end within 45 days. For example, a benefit was ending in 90 days, however it was updated to end in 20 days.
 - If a benefit ends within 45 days and a new benefit is not starting after the last one ended, a notice will issue (unless the below information applies).

The system will not generate a notice under the following circumstances:

- The notice was issued in the previous 45 days.
- The benefit end date is modified to end in the past.
 - Example: Today is 7/10/2020. The benefit is currently ending on 9/30/2020, however it was modified to end on 6/30/2020.
- The consumer is receiving EWE (Extended Waiver Eligibility) benefit.
 - Staff may set a reminder for 45 days from what would be the benefit end date to manually issue the notice.
- The assessment is in administrative status and has benefits that end after the original Valid Until Date*.
 - Example: A benefit was set to end 6/30 is extended by six months to 12/31 due to the consumer receiving Aid Paid Pending benefits.

*Please note: Benefits that have been further extended due to COVID-19 or for other reasons will also not receive a notice. The notice must be manually mailed out at least 14 calendar days in advance of a scheduled assessment.

Information to Consider:

- When cases are 'short certified' (i.e. there is an intent to complete a new assessment in less than a year), the '*Review By Date*' must match the benefit end date. If the dates do not match, the notice will be issued when the benefit is ending in 45 days, however, the assessment will not display on the 'CAPS 2 Assessment Review' report.
- When ending a benefit early due to a program closure (i.e. the consumer is moving to another state or is voluntarily closing benefits), a notice may unintentionally issue as described above.
- When modifying the benefit plan, it is important to have an approved benefit for the entire eligibility period, even if there is no provider in place. This will prevent a notice from being issued when there was no intent to schedule a new assessment.

If you have any questions about this information, contact:

Contact(s): APD.MedicaidPolicy@dhsosha.state.or.us	
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