DAUPHIN COUNTY MH/MR PROGRAM
POLICY AND PROCEDURE

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**Policy:** Consumers who are active with Medical Assistance can complete their liability assessment through the use of a Short Form Liability.

**Definition:**

*Short Form Liability:* a process which eliminates the need to complete a full face-to-face liability at the Case Management Unit. The completion of an approved form (see attached) which attests to a client’s eligibility and participation in the Medicaid program and thus sufficing as adequate documentation to determine that their liability will be assessed at $0 for both residential and outpatient services.

**Adult:** 18 years of age or older.

**Child:** Birth to 18 years of age.

**Procedure:** Persons who are eligible for Medical Assistance as determined under Pennsylvania’s Department of Public Welfare, Office of Medical Assistance Programs rarely incur a financial liability when applying the Liability Assessment Regulations as defined under Title 55, Public Welfare, Chapter 4300. The volume of liability assessments conducted with adults and children who are enrolled in the Medical Assistance Program and receive Medicaid is significant and the revenue collected is marginal. Therefore, the cost benefit ratio to complete a full liability assessment is not justified and it is thus deemed reasonable to conduct Short Form Liability assessments, per the following procedure, with these individuals.

1. Adults who are either entering the Dauphin County MH/MR Program’s mental health service system or have an active record may fulfill their obligation to complete a liability assessment via the use of a Short Form Liability if they are actively enrolled with Medicaid.
2. It is the responsibility of the Case Management Unit to verify a person’s eligibility through the use of either POSNet or the Eligibility Verification System (EVS).

3. Either the case manager or the liability technician may administer the Short Form Liability form. Case managers must receive training in the use of the Short Form Liability process prior to its use.

4. The completion of the Short Form Liability process may occur at the most convenient location for the assessor and the consumer.

5. The client must sign the Short Form Liability form attesting to their Medicaid eligibility, income status and indicating any third party insurance they are covered under. A copy of the Medicaid, Medicare and/or other third party insurance card should be attached to the Short Form Liability form.

6. The client must be made aware that they must notify the CMU of any change in their Medicaid eligibility and this may result in the individual having to complete a full liability.

7. The Short Form Liability form will be submitted to the Liability Technician for certification and data entry purposes. The liability will be assessed at $0. A copy will be filed with the clients records.

8. Periodic verification may occur utilizing POSNet. If a person is found to have lost their Medicaid eligibility, a full liability will be conducted, retroactive to the date when Medicaid benefits were discontinued.

9. Annual liability redetermination shall be conducted as identified in steps #1 through #7.

10. Children who were determined to have a $0 liability upon the completion of the initial intake and are eligible for Medical Assistance may complete a Short Form Liability for their redetermination as indicated in #9 above.