

# EMWS Part 2



Behavioral  
Health  
Division

## Transitioning from the Child/Adult Waivers to the Comprehensive or Supports Waivers

### Jessica

Welcome to the EMWS Part 2 training.

Today we will discuss the transition process in EMWS, from the Child and Adult Waivers to the Comprehensive or Supports Waivers

This is Jessica Fancher, Training Coordinator for the Division

Here with me today is Ragen Latham, Participant Support Specialist and Sheila Thomalla, Participant Support Specialist.

The screenshot displays the 'Close Case' form in the Electronic Medicaid Waiver System. The interface includes a top navigation bar with tabs: Task List, Search Cases (highlighted with a green circle), Waitlist, Reports, and Admin. On the left, a 'Waiver Links' sidebar lists various options, with 'Waiver' circled in red. The main form area is titled 'Close Case' and contains the following fields:

- Closure:** A dropdown menu showing 'Switching to Comp/Supports Waivers' (indicated by a red arrow from a green callout box).
- Notification Date:** A date field set to 4/16/2014.
- Effective Date:** A date field set to 5/31/2014 (circled in red, with a red arrow pointing to a green callout box).
- Comment:** A text area containing the text: 'Moving from the Adult to the Comprehensive Waiver. Please end the current plan of care on 5/31/2014 and start the Comprehensive Case on 6/1/2014.'
- Close:** A button at the bottom left of the form.

Two green callout boxes provide additional instructions:

- One box points to the 'Closure' dropdown with the text: 'Select "Switching to Comp/Supports Waivers"'.
- Another box points to the 'Effective Date' field with the text: 'The effective date needs to be the day before the requested start date of the new waiver.'

When you sign into Electronic Medicaid Waiver System, the first thing you want to do is search the case you would like to transition by clicking the “search cases” tab at the top of your screen.

Once you find the case you want to transition select “Waiver” under “Waiver Links”

At the bottom of that screen in the “Close Case” box select “Switching to Comp/Supports Waivers”. All Closures should be done by the Case Manager or the Plan Review Staff.

The Notification Date will be the day the case manager requests the transition. The effective date needs to be the day before the requested start date of the new waiver.

In the comment box, you will type in a note.

For example, you could put “Moving from the Adult to the Comprehensive waiver. Please end the current plan of care on 5/31/2014 and start the comprehensive waiver on 6/1/2014.”

### Waiver Links

- [Case](#)
- [Waiver](#)
- [Participant](#)
- [Contacts](#)
- [Associated Users](#)
- [Plan Enrollments](#)
- [Individual Budget Amount](#)
- [Letter History](#)
- [Document Library](#)
- [Assessment History](#)
- [Processes](#)
- [Targeted Case Management](#)
- [Notes](#)

### Closure

➡ [Case Manager Closure Review](#)

### Action

Acknowledge Closure

Complete

### Closure

**Current Closure Status:** Case Manager Closure Review

Closure: Switching to Comp/Supports Waivers ▾

Notification Date: 4/16/2014

Effective Date: 5/31/2014

Comment: switching to the Com Waiver.

Cancel Reason:

Because this closure was started by the PSS it will appear on the Case Manager's task list for "Case Manager Closure Review"

Please note on the left hand side of the screen that as you go through the transition process there will be new steps under "Closure". Because this closure was started by the PSS, the case manager will have a task for "Case Manager Closure Review."

### Waiver Links

- [Case](#)
- [Waiver](#)
- [Participant](#)
- [Contacts](#)
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- [Plan Enrollments](#)
- [Individual Budget Amount](#)
- [Letter History](#)
- [Document Library](#)
- [Assessment History](#)
- [Processes](#)
- [Targeted Case Management](#)
- [Notes](#)

### Closure

- [Case Manager Closure Review](#)
- [Close Medicaid Case](#)

### Action

Acknowledge Closure

Complete

## Closure

Current Closure Status:

Close Medicaid Case

Closure:

Switching to Comp/Supports Waivers

Notification Date:

4/16/2014

Effective Date:

5/31/2014

Comment

Moving from the Adult to the Comprehensive Waiver. Please end the current plan of care on 5/31/2014 and start the Comprehensive Case on 6/1/2014.

Cancel Reason

**The next step in the closure process is “Close Medicaid Case”. This is completed by the Long Term Care Unit Eligibility Staff.**

Once the case manager has completed the closure review, the next step in the closure process is to “Close Medicaid Case”.

This step is completed by the Long Term Care Unit Eligibility Staff. Please check in “Waiver Links” under “Associated Users” to ensure your local eligibility staff is associated with the case.



### Waiver Links

- [Case](#)
- [Waiver](#)
- [Participant](#)
- [Contacts](#)
- [Associated Users](#)
- [Plan Enrollments](#)
- [Individual Budget Amount](#)
- [Letter History](#)
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- [Notes](#)

### Closure

- [Case Manager Closure Review](#)
- [Close Medicaid Case](#)
- [PSS Closure Final Review](#)

### Action

Acknowledge ▾

Complete

## Closure

Current Closure Status:

PSS Closure Final Review

Closure:

Switching to Comp/Supports Waivers ▾

Notification Date:

4/16/2014

Effective Date:

5/31/2014

Comment

Moving from the Adult to the Comprehensive Waiver. Please end the current plan of care on 5/31/2014 and start the Comprehensive Case on 6/1/2014.

Cancel Reason

After the closure has been acknowledged by the *Long Term Care Unit*, it will go to the *PSS* for “PSS Closure Final Review”.

The Adult/Child Waiver Case is now closed.











After the closure has been acknowledged by the Long Term Care Unit it will go to the PSS for “PSS Closure Final Review”.

The Adult/Child Waiver Case is now closed.

## Waiver Links

- [Case](#)
- [Waiver](#)
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- [Targeted Case Management](#)
- [Notes](#)


## Processes

View	Process	Current Status	Complete	Start Date	Modified By	Modified Date
	Closure	Closed	Complete	4/16/2014 12:10:53 PM	rlatham	4/16/2014 12:51:06 PM
	Plan Of Care	Complete	Complete	8/3/2013 6:24:02 AM	rlatham	4/16/2014 12:51:06 PM
	Renewal	Cancelled	Complete	8/3/2013 6:24:02 AM	rlatham	4/16/2014 12:51:06 PM
	Quarterly Review	Completed Quarterly Review	Complete	7/3/2013 9:50:57 AM	Case manager	7/31/2013 12:43:17 PM
	Quarterly Review	Completed Quarterly Review	Complete	4/1/2013 2:30:47 PM	Case manager	4/29/2013 2:35:25 PM
	Quarterly Review	Completed Quarterly Review	Complete	1/1/2013 6:36:03 AM	Case manager	1/29/2013 3:33:17 PM
	Quarterly Review	Completed Quarterly Review	Complete	10/4/2012 3:38:58 PM	Case manager	10/31/2012 11:43:52 AM
	Update LT 104	Complete	Complete	10/1/2012 5:58:24 PM	PSS	10/1/2012 11:20:59 PM
	Update Psych	Complete	Complete	10/1/2012 10:19:27 AM	PSS	10/1/2012 11:45:27 PM
	Update ICAP	Complete	Complete	9/27/2012 4:12:18 PM	PSS	10/17/2012 10:52:57 AM

Once the closure has been completed, the Case Manager can check on the current status by going to the “Processes” section under “Waiver Links”.


Case Links

[Case](#)



Case

Waivers

View	Division	Waiver	Case Manager	Agency	Status	Start Date	End Date
	BHD	ADD	Case Manager	Agency	Inactive	11/1/2013	10/31/2014

Waiver Type

Comprehensive (21+) (CA)

Acquired Brain Injury(ABI)  
Comprehensive (21+) (CA)  
Comprehensive (Under 21) (CC)  
Support (21+) (SA)  
Support (Under 21) (SC)  
Children's Mental Health Waiver (CMH)

Add

At the same time the closure is being processed, the new Comprehensive or Supports Waiver is being activated by the plan review PSS staff.

Once the PSS receives the request to close the ADD/CDD case with the note about changing waiver type, the PSS will then go to "case" under "Waiver Links" and initiate the new waiver type. The PSS will choose from one of the options listed in the drop down box.

**Application**

**Waiver Links**

- Case
- Waiver
- Participant
- Contacts
- Associated Users**
- Plan Enrollments
- Letter History
- Document Library
- Assessment History
- Processes
- Targeted Case Management
- Notes

**Eligibility**

Create Application

**Action**

Submit Application

Complete

**Participant**

First Name: Donna Last Name: Test

Date of Birth: 00/00/0000 Gender: Female

Social Security Number: 000-00-0000 Medicaid ID: 06-00000000

Application Date: County: Laramie

Interested in Wyoming Life Resource Center: ☐

**Participant Address(es)**

Type	Street Address	City	State	Zip Code
Physical/Mailing	Address	Cheyenne	Wyoming	82001

Add

**Participant Contact Information**

Preferred Method of Contact:

No email found.

Add

Type	Phone Number	Primary
Home	(307) 555-1212	Yes

Add

**Contact(s)**

No contact found.

Add

**County**

**Emergency Contact**

The PSS will add the appropriate Long Term Care staff to the case in the “Associated Users” link.

If this is not completed Eligibility staff will not receive a task to process the new waiver case.

The PSS must select the County and list an emergency contact for the Application to save into the system.

Refer to the ADD/CDD case to get required information.

The “Application Date” will be the date the case manager initiated the closure for the Child or Adult Waiver case.

Both a physical and a mailing address must be listed. If the address is the same for physical and mailing that can be selected for the type.



## Search Cases

Last Name:

Medicaid ID:

First Name:

Date Of Birth:

SSN:

Gender:

Waiver:

Filter By Role:

Search

View	Last Name	First Name	Gender	SSN	Medicaid	Waiver Program	Enrolled
	Test	Donna	Female	XXX-XX-XXXX	XX-XXXX	BHD - ADD	Yes
	Test	Donna	Female	XXX-XX-XXXX	XX-XXXX	BHD - CA	No

When the Case Manager searches the case now they should see two waiver types under "Waiver Program"

When the Case Manager performs a search for the case now, they will now see two waiver types under "Waiver Program"

The case manager will see the old waiver type, BHD-ADD (Adult Waiver) and the new waiver type, BHD-CA (Comprehensive Adult).

Please notice on the screen shot that the ADD Waiver has a "Yes" under "Enrolled" while the CA Waiver shows a "No" for "Enrolled". This is because the Adult case has not been completely closed and the Comprehensive waiver case has not been fully activated. When working on plans during this time the case manager will need to make sure they are working on the correct waiver plan. If you work on the wrong plan your work will be lost.

### Process Instance

Process: Eligibility

Status	Description	Modified By	Modified Date
	Create Application	rlatham	4/16/2014 2:25:17 PM
	Select Case Manager	rlatham	4/16/2014 2:54:28 PM
	Complete LT 104		

Waiver: **BHD - CA**

The waiver type will be listed at the top of the LT 104 page

### LT 104 - ICF/ID Level of Care Assessment

Screening Date:  ICF/ID Admit Date:  County: **Laramie**

**Diagnoses**

No diagnosis found.

Add

**Services Needed**

The individual meets at least one criteria in either **Medical** or **Psychological**, and at least one criteria in **Functional**, indicating that the individual requires the provision of waiver services monthly to develop skills necessary for maximum independence and/or the prevention of regression or loss of current skills/abilities and meets ICF/ID level of care.

**Medical**

☐ Daily monitoring due to medical condition where overall care planning is necessary.

☐ Supervision due to medication effects.

**Psychological**

☐ Supervision due to behavior, abusiveness or assaultiveness.

☐ Supervision due to impaired judgment and limited capabilities.

☐ Supervision due to psychotropic drug effects.

**Functional**

☐ A structured and safe environment that provides supervision as needed to keep the person safe.

☐ Assistance with activities of daily living and self-help skills such as feeding toileting, dressing and bathing.

☐ Assistance with ambulation, mobility.

☐ Routine incontinence care, catheter care, or ostomy.

Save

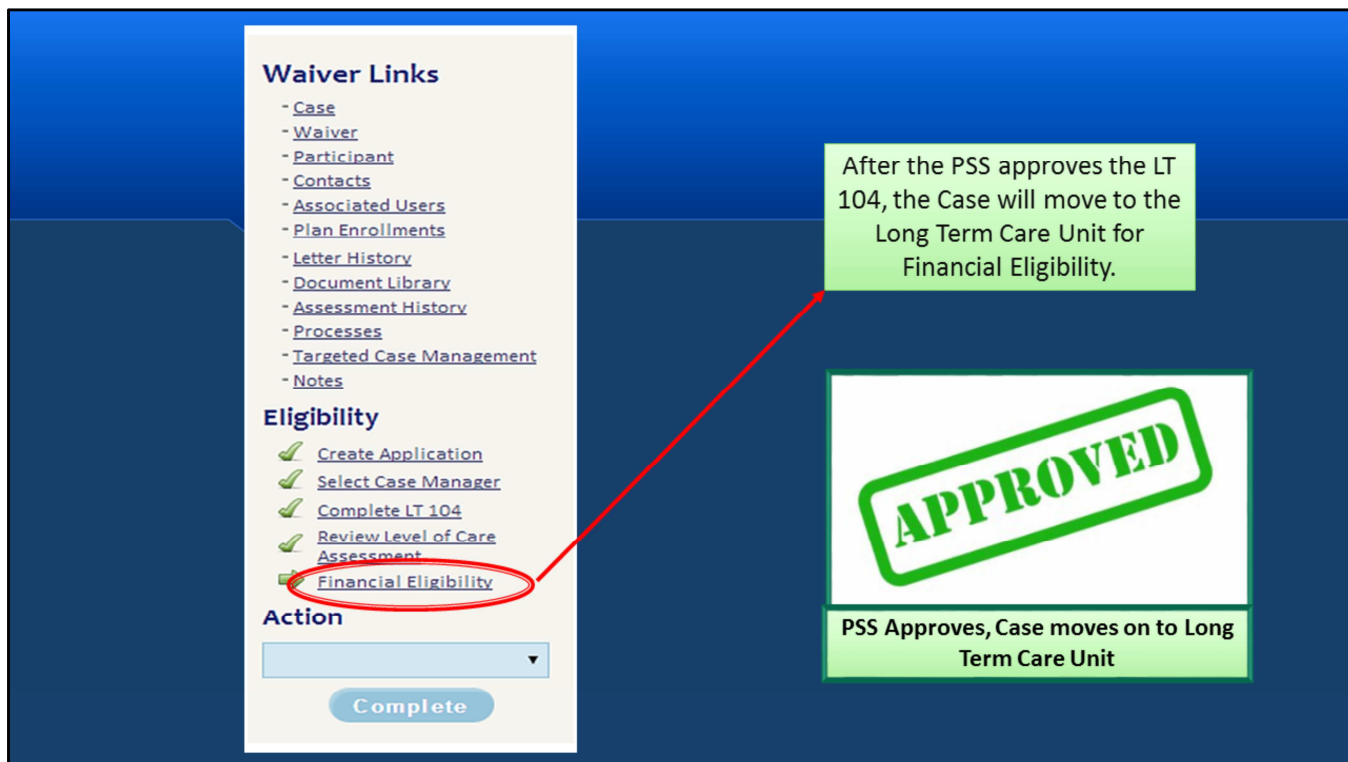
The case manager will receive a task to complete the LT 104. If the new waiver plan falls on an annual plan enrollment the case manger will complete a new screening. If the ADD/CDD is being ended early the previous screen date can be used.

Once a case manager has been assigned by the PSS, the assigned case manager will receive a task to complete a LT 104.

Remember the LT 104 is only good for 365 days so if the LT will expire within the plan enrollment a new one should be completed





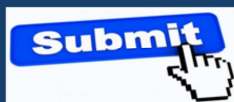


After the PSS approves the LT104, the case will move to the Long Term Care unit to determine financial eligibility. The eligibility worker will be checking to ensure that not more than 1 year has passed since the last verification of financial eligibility. The Long Term Care Unit will receive another notification from EMWS to "Activate Medicaid Case" later in the process when the waiver type needs to be changed from the Child or Adult Waivers over to the Supports or Comprehensive Waivers in the Wyoming Eligibility System (WES).

## Process Instance

Process: Eligibility

Status	Description	Modified By	Modified Date
✓	<a href="#">Create Application</a>	rlatham	4/16/2014 2:25:17 PM
✓	<a href="#">Select Case Manager</a>	rlatham	4/16/2014 2:54:28 PM
✓	<a href="#">Complete LT 104</a>	rlatham	4/16/2014 3:30:11 PM
✓	<a href="#">Review Level of Care Assessment</a>	rlatham	4/16/2014 3:47:21 PM
✓	<a href="#">Financial Eligibility</a>	rlatham	4/16/2014 3:54:00 PM
➡	<a href="#">Submit Psych Evaluation</a>		



When Financial Eligibility has been confirmed by the Long Term Care Unit, the case manager will receive a task to submit Psych Evaluation.

When Financial Eligibility has been confirmed by the Long Term Care Unit, the case manager will receive a task to submit Psych Evaluation.

Waiver: **BHD - CA**

The waiver type will be listed at the top of the screen

### Psych Evaluation

**Document**

Please upload the Psych evaluation document.

**Choose File** No file chosen

**Document Information**

Evaluation Date

Psychologist Name

Non-standard IQ ☐

IQ

**Diagnoses**

Diagnosis		
<input type="checkbox"/>	Mental Retardation - Moderate	Qualifying

**Add**

**Save**

**Waiver Links**

- Case
- Waiver
- Participant
- Contacts
- Associated Users
- Plan Enrollments
- Letter History
- Document Library
- Assessment History
- Processes
- Targeted Case Management
- Notes

**Eligibility**

- ✓ Create Application
- ✓ Select Case Manager
- ✓ Complete LT 104
- ✓ Review Level of Care Assessment
- ✓ Financial Eligibility
- ➔ Submit Psych Evaluation

**Action**

Submit Psych Evaluation ▼

**Complete**

Wyoming

The case manager will upload the assessment into the "Document" box by clicking on "choose file" and complete the information in the "Document Information" box before submitting the psych evaluation for review.

The new waiver type will be listed at the top of the screen.

The case manager will upload the current psychological evaluation into the "Document" box by clicking on "choose file" and complete the required information in the "Document Information" section before submitting the psych evaluation for review.

**Waiver Links**

- [Case](#)
- [Waiver](#)
- [Participant](#)
- [Contacts](#)
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- [Letter History](#)
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- [Processes](#)
- [Targeted Case Management](#)
- [Notes](#)

**Eligibility**

- ✓ [Create Application](#)
- ✓ [Select Case Manager](#)
- ✓ [Complete LT 104](#)
- ✓ [Review Level of Care Assessment](#)
- ✓ [Financial Eligibility](#)
- ✓ [Submit Psych Evaluation](#)
- ➔ [Review Psych Evaluation](#)

**Action**

**Received** ▼

**Complete**

*Wyoming*

**Psych Evaluation**

Comments

**Document**

Document: [CA Test Donna PsychEval 2010.03.14.docx](#)

**Choose File** No file chosen

**Document Information**

Evaluation Date: 3/14/2010

Psychologist Name: Dr. Dolittle

Non-standard IQ: ☐

IQ: 55

**Diagnoses**

Diagnosis		
<input type="checkbox"/>	Mental Retardation - Moderate	Qualifying

**Add**

The PSS will receive a task on the task list to "Review Psych Evaluation." The PSS will acknowledge that the Psych Evaluation has been received and the participant is eligible.

receive task

Once the psychological evaluation has been submitted the PSS will receive a task to "Review Psych Evaluation."

The PSS will open and review the psychological evaluation and then acknowledge that the Psych Evaluation has been received and the participant is eligible.

**Waiver Links**

- Case
- Waiver
- Participant
- Contacts
- Associated Users
- Plan Enrollments
- Letter History
- Document Library
- Assessment History
- Processes
- Targeted Case Management
- Notes

**Eligibility**

- Create Application
- Select Case Manager
- Complete LT 104
- Review Level of Care Assessment
- Financial Eligibility
- Submit Psych Evaluation
- Review Psych Evaluation
- Submit ICAP Evaluation

**Action**

Submit ICAP

Complete

**ICAP Request**

**Respondents**

No respondents found.

Add

Save

Emergency

**Express**

**ICAP**

**Document**

Please upload the ICAP results document.

Choose File

No file chosen

**Express**

**ICAP Details**

Evaluation Date

Service Score

General Score

Learning/cognition

Mobility

Has Mental Retardation Condition

Incapable of Walking

**Problem Behaviors**

Destructive to Property

Hurtful to Others

Socially Offensive Behavior

Unusual or Repetitive Hab

Disruptive behavior

Hurtful to Self

Uncooperative behavior

Withdrawal or Inattentive

**Adaptive Behavior Scores**

Motor Skills

Social and communication

Personal Living

Community Living

Broad Independence

**Diagnoses**

Diagnosis

Mental Retardation - Moderate

Qualifying

Add

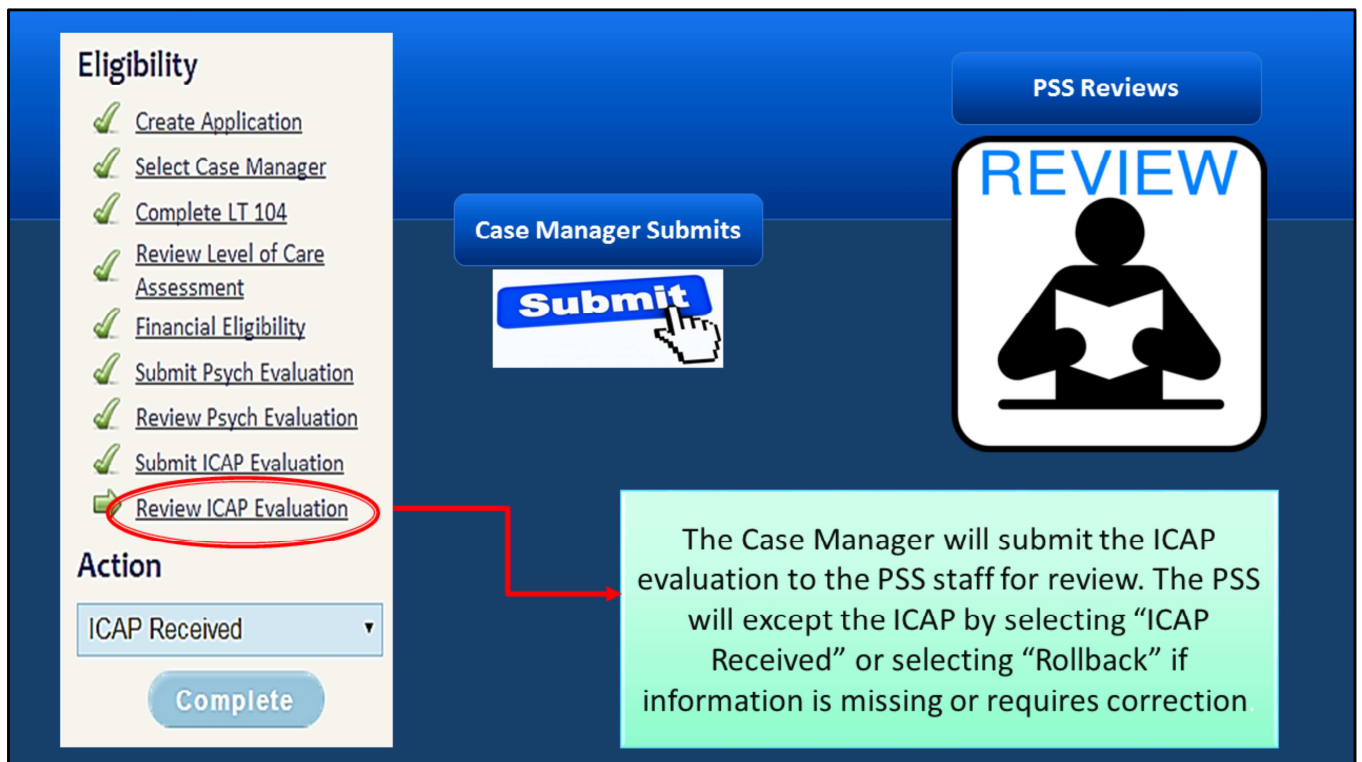
Save

After the psychological evaluation has been approved by the PSS staff, the case manager will receive a task to “Submit ICAP Evaluation”

Case managers will select the express button and upload the current ICAP.

Case managers will upload the current ICAP in the “Document” box by clicking “Choose File”.

The case manager must enter all necessary information under “ICAP Details” and “Diagnoses” before submitting the ICAP in the “Action” section under “Waiver Links”



After the Case Manager submits the ICAP evaluation to the PSS staff for review.

The PSS will open and review the attached ICAP and accept the ICAP by selecting "ICAP Received" or selecting "Rollback" if information is missing or requires correction.

**Eligibility**

- ✓ [Create Application](#)
- ✓ [Select Case Manager](#)
- ✓ [Complete LT 104](#)
- ✓ [Review Level of Care Assessment](#)
- ✓ [Financial Eligibility](#)
- ✓ [Submit Psych Evaluation](#)
- ✓ [Review Psych Evaluation](#)
- ✓ [Submit ICAP Evaluation](#)
- ✓ [Review ICAP Evaluation](#)
- ➡ [Waiver Eligibility Determination](#)

**Action**

Eligible ▼

**Complete**

**Eligibility**

- ✓ [Create Application](#)
- ✓ [Select Case Manager](#)
- ✓ [Complete LT 104](#)
- ✓ [Review Level of Care Assessment](#)
- ✓ [Financial Eligibility](#)
- ✓ [Submit Psych Evaluation](#)
- ✓ [Review Psych Evaluation](#)
- ✓ [Submit ICAP Evaluation](#)
- ✓ [Review ICAP Evaluation](#)
- ✓ [Waiver Eligibility Determination](#)
- ➡ [Eligibility Acknowledgement](#)

**Action**

Complete Eligibility ▼

**Complete**

**Eligibility**

- ✓ [Create Application](#)
- ✓ [Select Case Manager](#)
- ✓ [Complete LT 104](#)
- ✓ [Review Level of Care Assessment](#)
- ✓ [Financial Eligibility](#)
- ✓ [Submit Psych Evaluation](#)
- ✓ [Review Psych Evaluation](#)
- ✓ [Submit ICAP Evaluation](#)
- ✓ [Review ICAP Evaluation](#)
- ✓ [Waiver Eligibility Determination](#)
- ✓ [Eligibility Acknowledgement](#)
- ➡ [Eligible](#)

**Activated**

Once the Participant has been determined "Eligible" the Comprehensive/Supports case will be activated and the Case Manager should see the plan enrollment.

The next three steps are completed by PSS staff.

The case manager can check the status of the case by going to the "Processes" section under "Waiver Links".

Once the Participant has been determined "Eligible" the Comprehensive or Supports case will be activated and the Case Manager should see the plan enrollment on their task list.

## Prorated Plans of Care

- Plans not transitioning on renewal dates will be prorated for the first Comprehensive or Supports plan to maintain the original start date of the IPC. IBAs will be prorated by taking the IBA, dividing by 12, multiplying the number of months until the first of the month of the annual plan date.



## Questions



If you have questions regarding the training topic that was covered, please join us for the conference call to discuss this training topic on:



**May 6, 1:00 – 2:00 p.m.**  
**Call in number is 1-877-278-8686 Code 252484**

### Jessica

This training provided the basic steps necessary to transition a participant to the new waivers in EMWS.

We will have a part 3 of changes to EMWS in the near future. Part 3 will cover the rights and restrictions page.

We understand that many of you may have questions about changes in EMWS.

We will be holding a conference call on May 6 from 1:00-2:00 p.m. to answer your questions on this training topic.

The call in number and access information is listed on the slide.

# Printable PowerPoint

<http://health.wyo.gov/ddd/CompandSupptraining.html>

**The PowerPoint for this training can be found on our website under “Recorded Trainings and Supplemental Materials.”**

**Jessica**

If you would like a copy of the PowerPoint for this training, please go to the website listed on this slide.

There will also be a survey monkey link posted on our website after the training that case managers will need to take. This will serve as proof that you completed the required training.

You can find all training materials for the new waivers under the ***“Recorded Trainings and Supplemental Materials”*** tab.

Thank you for joining us today to learn about how to transition a participant to the new waivers.

If you have questions, please contact your area Participant Support Specialist.

Thank you from the Behavioral Health Division and have a wonderful day.