

Medicaid Administrative Claiming Local Health Jurisdiction Medicaid Eligibility Rate Proposal

A Medicaid Eligibility Rate (MER) proposal must be submitted to the Health Care Authority (HCA) for review and approval prior to participating in the Medicaid Administrative Claiming (MAC) program. A MER proposal may only be effective on the first day of a quarter, and may only terminate on the last day of a quarter. HCA approved MER proposals must be applied to MAC subcontractors; a subcontractor may not use a different MER. This document serves only as the proposal and is not providing guidance on how to identify which MER to use, gather data, or calculate the MER. All aspects of the MER must be in compliance with state and federal regulations. This form does not certify compliance. HCA approval of this MER proposal does not serve as approval or authorization for any component of the actual development or calculation of the MER.

The modified county-wide MER must be used for activity codes that require a proportional MER except for linkage activity codes. A client or client based MER may be used in lieu of the modified county-wide MER for linkage activity codes as described in the MAC LHJ coordinator manual. If a client or clinic based MER will be used, a narrative description that specifies the source of the data used, the calculation methodology used, definitions of the numerator and denominator used in the calculation methodology, and the frequency with which it will be calculated is required. A new proposal must be submitted to HCA for review and approval if any component of the MER changes.

1. Modified County-Wide MER

This MER is used for linkage-related activities within programs where clients are not identified, or when demographic data is unable to be collected, reported, or retained. This MER is also used for activities related to program planning around medical services for Medicaid and non-Medicaid populations. The calculation methodology was developed by the Research and Data Analysis Division of the Washington Department of Social and Health Services.

2. Client Based MER

This MER is used for linkage-related activities performed with programs where clients are identified, and personal data is collected and retained in an auditable data base. The calculation must be based on:

$$\frac{\text{Number of clients served by the budget unit that are Medicaid enrollees}}{\text{Total number of clients served by the budget unit}}$$

3. Clinic Based MER

This MER is used for linkage-related activities for LHJ programs that operate primary care or specialty clinics and all activities that are integral to or an extension of direct medical services must be excluded. The calculation must be based on:

$$\frac{\text{Number of patients served by the primary care or specialty clinic that are Medicaid enrollees}}{\text{Total number of patients served by the primary care or specialty clinic}}$$

