

Minnesota Department of Human Services

HIV/AIDS Division

Title: INCOMPLETE APPLICATIONS

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AUTHORITY: DHS HIV/AIDS DIVISION Program Administrator

PURPOSE: To establish polices and procedures for notifying a consumer and/or third party of any missing required information and documentation that is necessary to complete their application; as well as to inform the consumer of our incomplete application procedures.

POLICY: It is the responsibility of a Program HH applicant to submit a complete application to be considered for eligibility of Program HH benefits. [Please refer to complete application policy](#) for what is considered a complete application and the required documentation to determine eligibility for Program HH.

When an application to Program HH is deemed incomplete (i.e. missing information and supporting documents), Program HH will notify the applicant directly even if the application was sent through a third party (i.e. Case manager, social worker, benefit counselor, and authorized representative). However, Program HH will not notify a third party for missing application documentation. It is the responsibility of a client to provide all documentation from the third party that is needed to complete the application. The client is also responsible for ensuring all requested documentation is received by Program HH in order for the eligibility process to begin. The application will be denied if the requested missing documentation(s) are not received within thirty (30) days of the notification letter.

KEY STAFF: Intake Specialist, Eligibility Specialist

DEFINITIONS:

Third Parties—entities linked to the consumer’s eligibility process for Program HH *and* are not Program HH staff. This includes, but is not limited to, physicians, consumer employers, and case managers.

PROCEDURES:

An application is incomplete when it is missing any one of the required and/or additional materials. If an application is missing any of the required documentation, the Eligibility Specialist will notify the client directly.

I. General procedure:

1. Notify the consumer. The Eligibility Specialist will send a letter to the consumer, alerting them of missing information. The letter should include a checklist of the missing documentation(s), consumer enrollment status pending information receipt, and a deadline to avoid account closure or application disqualification. The Intake Specialist will call the consumer if an incomplete faxed application is transmitted on their behalf by a third party.
2. Update Program HH consumer status. The Intake Specialist, Eligibility Specialist, and the Insurance Specialist are responsible for updating consumer status in Program HH including 30-day application disqualification or account closure pending documentation receipt.
3. Following the guidelines in the notification letter, the consumer is responsible for all communications related to supplying the requested materials within the specified time span.
4. If the received documents are still incomplete, the consumer will be notified; a second notification letter will be sent along with the necessary forms.

II. Eligibility procedure:

The Eligibility Specialist follows the process described under **I. General Procedure**. Other methods of communication, such as calling, may be used in supplement to those described in general procedures at the discretion of the Eligibility Specialist.

5. Notify the consumer. The Eligibility Specialist will send a letter to the consumer, alerting them of missing information. The letter should include a checklist of the missing documentation, pending consumer status until receipt of information, and a deadline to avoid account closure or application disqualification. The Intake Specialist will call the consumer if an incomplete faxed application is sent in on their behalf by a third party.
6. Update consumer eligibility status on MMIS and EDMS. Consumer will remain on pending status until all required application information is received. Include the 30-day date of application disqualification or account closure
7. Following the guidelines in the notification letter, the consumer is responsible for all communications related to supplying the requested materials within the specified time span.
8. Program HH will notify the consumer when all requested materials are received. If the received documents are still incomplete, the consumer will be notified; a second notification letter will be sent with the 30-day date of application disqualification or account closure deadline.
9. Update consumer record and case notes on MMIS and File Tracker.

III. Insurance procedure:

The Insurance Specialist follows the process described under **I. General Procedure**. Other methods of communication, such as calling, may be used to supplement the described general procedure at the discretion of the Insurance Specialist. In addition, the Insurance Specialist acts as the primary liaison between the insurance provider and the consumer; therefore, case follow-up may include partial responsibility on the Insurance Specialist when following mutual business practice with the provider—communications requiring the use of internal phone numbers and

email addresses. The consumer is ultimately responsible for providing all needed follow-up documentation pertaining to missing provider information.

10. Notify the consumer. The Insurance Specialist is responsible for calling the consumer to request for the missing information. A letter to the consumer addressing communications on missing information can be sent at the discretion of the Insurance Specialist or by consumer request. The letter should include a checklist of the missing documentation, pending consumer status until receipt of information, deadline to avoid account closure or application disqualification. The Intake Specialist will contact the consumer if a faxed application is incomplete, even if the application is faxed on their behalf by a third party.
11. Update consumer provider status on MMIS and EDMS. Consumer will remain on pending status until all required application information is received. Include the projected date of application disqualification or account closure.
12. Following the guidelines in the notification letter, the consumer should supply all the requested materials within the specified time span. The Intake Specialist will notify the insurance provider and the consumer when the requested documentation is received. If the received materials are still incomplete, the consumer will be notified. The Insurance Specialist is responsible for documenting recurring patterns of incomplete submissions after requesting information; this includes sending a notification letter.

REVIEW: Yearly

REFERENCES: Fax Policy, Required Fields for Program HH Applications Policy

ATTACHMENTS: Not Applicable