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ENROLLMENT

- In MACSIS, enrollment and eligibility determination occurs simultaneously and it
 involves determining eligibility for services. received by members paid for in part or
 wholly by the ADAMHS Board. Upon enrollment a client will be assigned a unique
 client identifier (UCI) and is entered into MACSIS. The UCI is a statewide unique
 client ID number assigned to the client upon initial enrollment and will be used for
 claims adjudication and data reporting throughout the system by the ADAMHS
 Board.
- The contract providers will follow the Confidentiality Policy and Procedures prepared by the ADAMHS Board prior to provider releasing information necessary for payment by the ADAMHSB.
- Enrollment will require the collection of a minimum data set to enroll a client in MACSIS. Providers will furnish to the ADAMHS Board Enrollment staff the necessary information to enroll the member into MACSIS. These data elements are on the Enrollment (E-1) Form.
- Enrollment into MACSIS will be the responsibility of the ADAMHS Board. The
 Enrollment Specialists and other staff designated by the Board will have on line
 access to Member Enrollment Modules and will share the enrollment responsibilities.

ELIGIBILITY

- Medicaid Eligibility: Medicaid recipients are automatically enrolled in MACSIS when they present for services. Medicaid Eligibility periods will be available and stored in MACSIS.
- Non Medicaid Eligibility Clients who present for services that will be paid for in part or in whole by the ADAMHSB will be enrolled. These clients must meet the Clinical, Financial thresholds.
- **Clinical Eligibility** for Board funded services is determined upon application of the Board's protocols for admission to services.

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- **Financial Eligibility** for each client determines the payor(s) and their liabilities for services provided to that client. Financial Eligibility for non Medicaid or for Medicaid clients who are receiving Non Medicaid services is determined through application of the Board approved Board Subsidy Policy and consideration of third party payors.
- Residential Considerations are used to determine which county pays for the service to that member. County of Residence is on the E-1 Form and will be used to determine the process. Persons who present for services who are not residents of Montgomery County and residents of a county that is not MACSIS ready will be enrolled into MACSIS through the ADAMHSB Board for Montgomery County. When all counties are on MACSIS, Non-Medicaid will be enrolled for Crisis Services and others as approved by the Board staff. Services rendered to out of county clients enrolled in MACSIS under Montgomery County Group will be paid for by the ADAMHSB Board for Montgomery County will then bill the county of residence after the claim has been adjudicated.
- **Eligibility Exceptions:** Financial eligibility can be waived when persons access services in a crisis or emergency situation, or for persons hospitalized or recently discharged (within 60 days) from the State Hospital where residency has already been determined for the purpose of payment for hospital stay.

PUBLIC FUNDS

 This includes all Federal, State and Local pass through funds, Medicaid, Local Levy funds, TXX, Block Grant funding from State or Federal Governments, and some Criminal Justice funding (131) and any other funds administered by the ADAMHSB Board for Montgomery County.