




Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Robert R. Neall, Secretary

To: Coordination of Community Services Agencies

From: Bernard Simons, Deputy Secretary 
Developmental Disabilities Administration

Re: Revised COVID-19 – DDA Medicaid Waiver Application Submission to Eligibility Determination Division

Effective: March 27, 2020

Note: Please ensure appropriate staff members in your organization are informed of the contents of this memorandum.

Background

On March 5, 2020, Governor Lawrence J. Hogan, Jr., declared a State of emergency due to disease (“COVID-19”) caused by the novel coronavirus. COVID-19 is a severe respiratory disease, resulting in illness or death, caused by person-to-person spread of the novel coronavirus. To protect individuals with intellectual and developmental disabilities, Medicaid waiver processes and requirements were amended on March 23, 2020 to include the option for completion telephonically or via a virtual platform and electronic submission to the Department. This process is being amended as noted below.

Revised - Electronic Medicaid Waiver Application Submission Process and Guidance

Effective immediately, the following revised process shall be used to submit a Developmental Disabilities Administration’s (DDA) Medicaid Waiver programs (i.e. Family Supports, Community Supports, and Community Pathways) Medicaid Waiver Application to the Eligibility Determination Division (EDD).

Revised Process:

1. Coordinators of Community Services (CCS) uploads the Medicaid Waiver application into LTSSMaryland as per standard process.
2. CCS to send a secured email to EDD with the applicant’s identifying LTSSMaryland identification number.
3. **New – CCS shall attach the DDA Medicaid Waiver application and supporting documentation to the email sent to EDD.**
4. Once received, the EDD will download the application and review for processing.

Emails to EDD should be sent to the following individuals:

Contact Person	Email Address
Carolyn Cornish	carolyn.cornish@maryland.gov
Othille Henry	othille.henry@maryland.gov
Jackie Dunphy	jackie.dunphy@maryland.gov

REVISED - Email Format:

Subject Line: DDA Waiver Application - ID: (insert person's LTSSMaryland ID #)

Note: Revision removes the person's name in the subject line.

Body of Email:

The DDA Medicaid Waiver application for (insert person's first and last name) – ID: (insert person's LTSSMaryland ID #) has been uploaded into LTSSMaryland for the (insert – Family Supports, Community Supports, or Community Pathways) Waiver Program.

Example:

Subject Line: DDA Waiver Application - ID: 111111AA111111

Body of Email

The DDA Medicaid Waiver application for John Doe - ID: 111111AA111111 has been uploaded into LTSSMaryland for the Family Supports Waiver Program.

Important: The revised procedure outlined can be completed instead of the CCSs directly mailing the DDA Medicaid Waiver application and supporting documentation along with a cover memo to EDD. CCSs *must email* the DDA Medicaid Waiver application, forms, and supporting documentation in order for the EDD to be able to access.

cc: Debbie Ruppert
Marlana Hutchinson
DDA Headquarter and Regional Office Staff