Attachment 3: Member Use of Personal Resources

Member Use of Personal Resources (MUPR)

Lakeland Care, Inc (LCI) is responsible to provide services and items within the Family Care Benefit Package that are necessary to support the member’s individual long-term care outcomes. LCI and its providers are strictly prohibited from billing members (including the member’s legal representative and/or member’s family member and/or member’s significant other on behalf of the member) for such services/items. Members (or others on their behalf) are only able to purchase services and items within the benefit package on a limited basis, as outlined in the DHS/MCO Contract and LCI Policy and Procedure.

The limited situations considered permitted uses of member resources are allowable only after the Resource Allocation Decision (RAD) process has been completed by Interdisciplinary Team (IDT) staff with the member/legal representative:

1. The member/legal representative, member’s family or significant other wants to voluntarily purchase services or items IDT staff has denied as not being cost-effective substitutions for services or items in the benefit package, and proper notice of that decision has been given to the member/legal representative.
2. The member/legal representative, member’s family, or significant other wants to voluntarily purchase a service or item within the benefit package and has been denied by IDT staff because it has not been identified as necessary to support the member’s Long-Term Care Outcome(s), and proper notice of the decision denying the service or item has been given to the member/legal representative.
3. The member/legal representative, member’s family or significant other wants to voluntarily purchase a service or item within the benefit package, as a substitute for an item or service authorized by IDT staff, where the member prefers a more costly alternative because it offers a broader scope or additional features than the service or item authorized by the IDT staff, or because the member prefers an additional amount or longer duration of the service or item authorized by the IDT staff, and proper notice of the decision denying the service or item has been given to the member/legal representative.
4. The member/legal representative, member's family, or significant other wants to voluntarily purchase a non-emergency, non-court-ordered service or item within the benefit package that is authorized by LCI from an out-of-network provider. This is only permissible if LCI has considered but decided not to authorize the out-of-network provider because it does not meet LCI's standards or does not accept LCI payment rate for the service or item.
5. The member/legal representative, member’s family, or significant other wants to make a voluntary donation of cash or something else of value to LCI.
6. The member/legal representative, member’s family, or significant other wants to make a voluntary payment to the State Medicaid Program.

For any of the above instances, where the member, member’s legal representative, member’s family member, or member’s significant other chooses to use their personal funds to purchase a service/item in the Family Care Benefit Package on the member’s behalf, LCI must ensure the member/legal representative has been counseled to assure the use of personal resources is wholly voluntary. This counseling includes:

1. Following completion of the RAD process, resulting in issuance of an NOA if a member/legal representative requested the item or service and IDT staff have denied the request; or, if a previously-received item or service has been, reduced, suspended or terminated
2. In #4 - #6 above, IDT staff will counsel the member/legal representative that such use of personal resources is entirely voluntary and shall document this counseling in the member record.

After the appropriate counseling has been provided by IDT staff to the member/legal representative, IDT staff will complete the MUPR fax form. This form serves as authorization from LCI that the specified provider can directly bill the member for the specified item/service, and that the member/legal representative or another individual on the member’s behalf is voluntarily electing to pay for the service/item using personal resources/funds.

There are additional conditions, considerations, and limitations on member/legal representative, family, or significant others purchasing services/items in the Family Care Benefit Package that are specified within the LCI Policy and Procedure and outlined in the DHS/MCO contract. If there are questions regarding a member specific situation, please reach out to the member’s IDT staff. For general questions, please reach out to your Provider Specialist.