

Lancaster County Drug & Alcohol Commission	Fiscal # 1 Policy: Guarding LCDAC as the “payor of last resort”
<i>Most Current Revision:</i> 06152022 <i>Page:</i> 1 of 1 <i>Effective Date:</i> 06152022	

I. Purpose

To ensure that when the LCDAC funds are requested as payment that ALL other funding options have been exhausted.

Because LCDAC funding is considered the "payer of last resort", all other sources must first be utilized before LCDAC funds may be rendered.

Other sources may include:

- Medical Assistance or Medicaid;
- Veteran’s administration;
- insurance coverage;
- private pay; and/or
- the treatment service provider may also opt to scholarship the individual.

II. Procedure

It is the treatment service provider’s responsibility to:

- Determine the funding eligibility status for each individual served.
- Ensure eligibility status is verified during the client’s first treatment visit AND verified at EVERY subsequent session.
- Upon learning that the individual’s funding has lapsed, the individual MUST apply for medical assistance* immediately
 - *only if the individual was being funded by MA; which then lapsed; & the reason for the lapse is based on the individuals exceeding the qualifiers for MA; then & only then the individual does not need to reapply for medical assistance
- The first and most important step in this process is to have the individual apply for medical assistance benefits IMMEDIATELY
 - ***Refer to CMCS 29 Medical Assistance Application for complete instructions***
 - Soliciting MA benefits may require assistance, so it will fall to the treatment provider to ensure that the proper procedures to apply for MA are fully executed
 - The treatment provider must ensure that the individual has the adequate assistance to fulfill the requirement of properly applying for medical assistance
- Be advised, while waiting for MA eligibility determination, individuals may be eligible for LCDAC funding

Approved By:



Rick Kastner LCDAC Executive Director

06152022

Date