

KS WORK UnitedHealthcare Carryover Frequently Asked Questions (FAQ)

What is Carryover in the WORK program?

Carryover is a cumulative savings budget where unspent funds from a participant's past monthly allocations accumulate. These funds are available to spend on goods/services if authorized.

How do funds accumulate in Carryover?

All unspent funds from a monthly budget are swept to the participant's Carryover budget 45 days after the end of the month of service. The unspent funds that sweep include authorized funds that have not been spent (e.g., the remaining funds on a partially spent authorization) and unallocated funds as well.

What special services can be authorized within the Carryover budget?

The following special service codes can be authorized within a participant's Carryover budget.

- Sick or vacation leave (COLEAVE)
- Advertising (COADS)
- Health insurance (COINS)

These special service codes are only available in the Carryover budget, they are not available to be authorized within monthly allocations. These service codes are only to be entered in the Web Portal Carryover budget by a UnitedHealthcare administrator if they have been approved in the participant's paper individualized WORK budget.

Can standard services be authorized within the Carryover budget?

Yes, all of the service codes available for use through monthly allocations are also available to be authorized within the Carryover budget. These regular service codes are only to be used to pay invoices/timesheets received more than 45 days after the end of the month* meaning the original authorization is no longer valid because funds have swept from the monthly allocation to Carryover. In this case, the original authorization (approved in the participant's paper individualized WORK budget) can be re-created using the correct/original service code within the Carryover budget, in order to pay the timesheet or invoice.

How are authorizations entered into Carryover?

Authorizations are entered into a participant's Carryover budget within the BetterOnline™ Web Portal by a UnitedHealthcare administrator based on the participant's paper individualized WORK budget, similar to how monthly allocation authorizations are entered.

Do services have to be authorized in Carryover in advance of service provision?

Yes, the WORK program requires prior-authorizations. This means that Carryover is not to be authorized after a good or service has already been purchased or hours have already been worked (these situations are considered "overages" or "over-billing" and are not allowed). Carryover is only to be used for services that have been approved in the participant's paper individualized WORK budget in advance of service provision or to pay invoices/timesheets received more than 45 days after the end of the month of service* based on the original authorized amount as explained above.

Can Carryover be used if a provider works extra hours (more than authorized)?

Carryover is not to be used for extra hours that were not pre-authorized. If a participant requests additional hours to be authorized out of Carryover in advance of the services being provided, the Care Coordinator should discuss with the ILC and the participant whether the participant should have a new assessment conducted. If emergency hours are needed for a specific month, participants should let their ILC know right away so that the ILC can work with UnitedHealthcare to make sure funds are available and authorized before Public Partnerships LLC (PPL) receives the timesheet or invoice for the emergency services.

When must Carryover funds be spent by?

Quarterly, after the 10th of March, June, September, and December of each year, PPL returns to UnitedHealthcare all unallocated Carryover funds from participants' Carryover budgets except for an amount equal to 15% of the participant's current monthly allocation. Unallocated funds are unauthorized funds – this is any money that has accumulated within Carryover that has not been encumbered within a service authorization. If funds are authorized within Carryover, even if they have not been spent yet, they will not be returned to UnitedHealthcare as part of the quarterly funds return.

EXAMPLE: As of March 10th participant Jane Doe has a total Carryover budget of \$300, which contains a COLEAVE authorization for \$50 and a COINS authorization for \$50. In this situation, it only matters how much has been authorized in the Carryover budget and not how much has been spent (in this case \$100 total has been authorized). The \$100 authorized cannot be returned to UnitedHealthcare because those funds have been set aside for specific use. So, that reduces the funds at stake to \$200 (\$300 total Carryover budget -\$100 authorized for specific goods/services = \$200 unauthorized funds left). However, PPL then has to make sure to leave a 15% cushion. Jane has a monthly allocation amount of \$1,000 during the present month (March), so 15% of this amount (\$150) would be her cushion. Because of the authorized funds and cushion, only \$50 of Jane's \$300 Carryover budget will be returned to UnitedHealthcare this quarter (\$300 total Carryover budget -\$100 authorized funds -\$150 cushion = \$50 gets returned to UnitedHealthcare).

Total Carryover	Authorizations in Carryover	15% of the monthly allocation (cushion)	Amount that would be
\$300	\$100	\$150	\$50

**PPL will not accept invoices and timesheets received more than 90 days after the date of service per program rules.*