

APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision # 057

Chapter / Section Overview - Long-term Services and Supports chart

Issued Date 1/22/2019

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Summary of Revision

We are splitting this section into two separate pages. One will be titled Overview- Long-Term Services and Supports- Chart and above it to have the overview language titled Overview- Long Term Services and Supports

Apple Health (Medicaid) Manual revision via track changes:

http://www.hca.wa.gov/free-or-low-cost-health-care/program-administration/overview-long-term-services-and-supports-chart

Overview - Long-term Services and Supports Program Administration

Revised

Purpose: To give an overview of program administration for long-term services and supports (LTSS) for individuals in medical institutions, receiving Home and Community based services authorized by either Developmental Disabilities Administration (DDA) or Home and Community Services (HCS), or Hospice services authorized by Health Care Authority.

ACES is programmed for shared cases based on the program responsibility chart.

ACES is programmed to auto assign Hospice cases and HWD cases that are not on HCS services to the DDA Long Term Care (LTC) Specialty Unit (017).

What is an institutional medicaid program and what are long-term care services?

The term "institutional" medicaid means institutional medicaid rules are used in eligibility. This group has initial eligibility for the medicaid and post-eligibility that determines if the client pays toward the cost of care. These clients are either residing in a medical institution or on a HCB Waiver. Some programs may use the same rules as a HCB Waiver such as Hospice, PACE and RCL and may pay toward the cost of care.

In ACES, the institutional medical programs are under the L01, L02, L95, L99, L21, and L22 (ABD) programs, L04 and L24 state-funded long term care, or K₋-track (Modified adjusted gross income, MAGI based) for children and families. PACE and Hospice as a program is under the L31 and L32 program. RCL is under the L41 and L42 program. Under MAGI, clients can be on the Hospice or RCL program. Institutional rules are only used if the client is not eligible for another CN or ABP program.

Long-term care (LTC) programs provide services for the aged and disabled in need of institutional care. Some individuals who receive LTC services are able to continue living in their home or in an alternate living facility (ALF) on a Home and Community based (HCB) Waiver authorized by Home and Community Services (HCS) or the Development Disabilities Administration (DDA). LTSS programs that are not considered "institutional" programs are Medicaid Personal Care (MPC) and Community First Choice (CFC).

Basic guidelines:

ABD medical programs are the aged, blind, disabled (ABD) or SSI-related medical programs. Modified adjusted gross income (MAGI)_medical is done through the Health Plan Finder/Health Benefit Exchange.

TANF/Refugee cash and related food benefits are always maintained by <u>Community Services Division</u> (CSD).

HCS and DDA LTC specialty financial workers do not maintain MAGI medical or TANF/Refugee cash assistance and the related food benefits.

HCS and DDA LTC specialty workers always maintain ABD medical programs for clients receiving HCS and DDA services. They also maintain the ABD medical program for a spouse when the other spouse is on LTSS. If the client on LTSS is an adult, the HCS or DDA financial worker maintains the WASHCAP or food benefits for the HH.

DDA LTC specialty workers do not maintain related food benefits when the only client on DDA services is a minor.

ACES is programmed for shared cases based on the program responsibility chart.

ACES is programmed to auto assign Hospice cases and Healthcare for Workers with Disabilities (HWD) cases that are not on HCS services to the DDA Long Term Care (LTC) Specialty Unit (017).

Link to the newly created program administration chart