

## APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision # 083

Chapter / Section | Apple Health – Long Term Services and Supports

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## **Summary of Revision**

State-funded long-term care for noncitizens | Washington State Health Care Authority

## State-funded long-term services and supports (LTSS) for non-citizens

Revised date 4/1/2024 Purpose statement

- There are 2 state-funded LTSS programs:WAC <u>182-507-0125</u> describes the state-funded long-term services and supports program for those needing LTSS outside of a hospital
  - a. A slot for this program requires a pre-approval by Emily Watts, Residential Program Manager at Home and Community Services (HCS) headquarters.
  - This program has limited funding by the legislature and is only used for those not eligible for the state-funded Medical Care Services (MCS) program.
  - c. The ACES program for nursing facility coverage is L04. The case will trickle to a L95 if income is over the special income level (SIL).
  - d. The ACES program LTSS at home or in an alternate living facility is L24.

- 2. WAC <u>182-508-0005</u> State-funded medical care services (MCS) program for those eligible for ABD cash and HEN eligibility described in <u>388-400-0060</u>.
  - a. Most individuals on MCS are legally admitted and in their 5-year bar for federal medicaid.
  - b. This program only covers state-funded residential and nursing facility services. MCS does not require pre-approval for nursing facility or ALF admissions. There is no in-home services without an approved ETR by HCS HQ.
  - c. The ACES code is A01, A05 and A24.

ALTSA/HCS headquarters must track each case using the state funds to pay for long-term care services under this program.

## The following must be reported to Residential Policy Program Manager, **Emily** Watts.

- New admits. Include the date and facility.
- Discharges. Include the date and circumstances.

Any closures. Include the date and circumstances. Specialty Hospital Unit for AEM coverage

Most admissions into the state-funded long-term care program start out in a hospital. Hospital applications are completed by a specialty hospital unit at CSD for a determination of AEM for those 65 and older and not eligible for the MAGI AEM program

The HBE determines the eligibility for individuals receiving Health Care Coverage under the Modified Adjusted Gross Income (MAGI) method.

This unit refers to HCA medical consultant for possible AEM coverage in the hospital.

Prior to admission into a NF, a prior approval by the HCS residential program manager is needed. Even if there is an approval of AEM in the hospital, AEM does not cover NF admissions.

Once an AEM Hospital case has been approved a NF slot by HCS HQ, HCS financial staff will transfer the case into HCS for maintenance and tracking.

**Example #1:** Joe Smith is approved through 10/31/2009 under the federal AEM program. The federal AEM program for nursing home ended on 10/31/2009. Effective 11/1/2009, this client was grandfathered into the state-funded nursing facility program as Mr. Smith is still in need of nursing home care. The medical coverage group in ACES is an L04.

**Example #2:** Jane Smith has been in a hospital for six months. All options for alternative settings has been explored by the hospital. She must either remain in the hospital indefinitely or be placed in a nursing home.

She is assessed by the HCS social worker and meets NFLOC. The HCS office handling the assessment contacts HCS headquarters for an available slot under the state-funded long-term care program. Once headquarters approves a slot and the client is financially and resource eligible, an L04 is opened in ACES. The nursing home will be able to admit Jane and bill under the state-funded nursing facility program.

**Example #3:** Jayna Smith is a legally **admitted non-citizen in the 5-year bar**.

Jayna is over 65, has been hospitalized, and needs of nursing facilitycare due to a stroke. She has been assessed by the HCS SW and meets NFLOC.

Jayna can be opened on ABD cash and state funded MCS medical. There is no need to refer for the state-funded funded nursing facility program.

MCS placements do not need a preapproval by HCS HQ.