

APPLE HEALTH (MEDICAID) MANUAL REVISION

Revision # 086

Chapter / Section | Long-term Services and Supports

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<u>Overview: long-term services and supports program administration | Washington State</u> <u>Health Care Authority</u>

Summary of Revision

There was a duplication of information on this manual page, and page re-written for clarity.

Note added. The new Apple Health Expansion (AHE) that is effective 7/1/2024 does not include Long-term services and supports authorized by DDA or HCS

Add Medical Programs LTSS Chart

Overview: Long-Term Services and Supports (LTSS) Program Administration

Revised date 06/10/2024

Purpose statement

To give an overview of program administration for Long-Term Services and Supports (LTSS) for individuals in medical institutions or receiving Home and Community Based services authorized by:

Developmental Disabilities Administration (DDA) or

- Home and Community Services (HCS), or
- Hospice as a program

What is an institutional Medicaid program and what are Long-Term Care Services?

The definition of institutional is described in <u>Institutional status | Washington State</u> Health Care Authority

Long-term Care (LTC) and Long-term Services and Supports (LTSS) are defined in: Definitions: long-term services and supports | Washington State Health Care Authority

LTC Apple Health has initial eligibility for Medicaid and post-eligibility treatment of income (PETI) to determine if the client pays toward the cost of care. LTC is:

- Residing in a medical institution 30 days or more
- On Home and Community Based (HCB) waivers and programs using HCB waiver rules | Washington State Health Care Authority:
 - Hospice as a program
 - Program of all-inclusive care for the elderly (PACE) | Washington State
 Health Care Authority
 - o Roads to Community Living | Washington State Health Care Authority
 - State-funded long-term care for noncitizens | Washington State Health Care Authority

The LTSS group includes all LTC programs indicated above and non-institutional programs and services:

- Medicaid Personal Care | Washington State Health Care Authority
- Community First Choice | Washington State Health Care Authority
- <u>Tailored supports for older adults (TSOA) | Washington State Health Care Authority</u>
- Medicaid Alternative Care (MAC) | Washington State Health Care Authority
- HCS state-funded residential program through the Medical Care Service (MCS) program | Washington State Health Care Authority

In ACES, the LTSS medical programs are:

- L01, L02, L95, L99, (nursing facility (NF), Residential Habilitation Centers (RHC) and Hospice Care Center (HCC)
- L21. and L22 DDA and HCS HCBS Waivers
- L04 and L24 state funded LTSS for non-citizens
- L31 and L32 PACE or Hospice as a program
- L41 and L42 RCL program.

• L51 and L52 non-institutional Community First Choice (CFC) or Medicaid Personal Care (MPC).

LTSS services not under L track in ACES:

- T02, Tailored Supports for Older Adults (TSOA, does not include Medicaid Coverage)
- A01, A05, A24 Medical Care Services (MCS) based on ABD cash or HEN eligibility covers NF and HCS state funded residential.
- S08, Apple health for Workers with Disabilities (HWD) on HCS or DDA services remain on the S08 program with the service coded. <u>Apple Health for Workers</u> with Disabilities | Washington State Health Care Authority
- N track, Modified Adjusted Gross Income (MAGI) programs when authorized CFC, MPC, MAC, RCL due to categorically needy (CN) or Alternate Benefit Plan (ABP) scope of care (maintained by Health Care Authority (HCA).
- D track, Foster Care. Can authorize CFC, MPC or MAC but the medical is maintained by HCA.
- S30 Breast and Cervical Cancer program. Can authorize CFC, MPC or MAC but the medical is maintained by HCA.

Note: Medical Program chart for HCS and DDA is located on the Financial Eligibility and Policy SharePoint under desk aids.

Basic guidelines:

DSHS maintains SSI, SSI related and Medicare Savings Programs (MSP) programs for the aged, blind, and disabled per the DSHS and HCA operating agreement. DSHS has 3 entities determining eligibility for this group:

- Home and Community Services (HCS) determines eligibility and maintains
 cases for those on HCS services, this includes their spouse even if the spouse is
 not on services. In addition, authorizes basic food and WASHCAP for those on
 HCS services.
- Developmental Disability Administration (DDA) determines eligibility and maintains cases on DDA services. In addition, DDA does:
 - HWD cases not on HCS or DDA services
 - Hospice as a program when institutional rules are needed.
- Community Service Division (CSD) maintains:
 - All remaining SSI, SSI related, and Medicare Savings Program cases are not on HCS or DDA services.
 - All cash programs except for ABD cash when a client is on DDA or HCS services. This is a shared case.
 - o Food benefits for the household when the DDA client is a minor child.

Health Care Authority (HCA) maintains the remaining Apple Health programs that are not SSI, SSI related or Medicare Savings Programs.

If a client submits an application that requests a variety of services, including Nursing Facility (NF), ALF and hospice, but the client hasn't elected hospice yet, HCS determines eligibility and keeps the case until a hospice election is received.

The Apple Health Expansion state-funded program effective 7/1/2024 does not include long-term services and supports authorized by HCS or DDA.