



TO: Health Reform Oversight Committee
FROM: Monica Caserta Hutt, Commissioner, Department of Disabilities, Aging and Independent Living
DATE: August 5, 2016
RE: **Long-Term Care Medicaid 1115 Waiver; Choices for Care Moderate Needs Group Information**

Following up on my testimony of July 25, 2016, below please find the information requested related to the overall length of time that it takes to determine eligibility for Long Term Care Medicaid and additional details related to the Choices for Care Moderate Needs Group (CFC MNG) Eligibility administered by the Department of Disabilities, Aging and Independent Living (DAIL). I hope this answers all of your questions. Please feel free to contact me if you would like additional information.

- I. **Long-Term Care Medicaid Eligibility:** As presented during my testimony, eligibility for Long Term Care Medicaid is determined jointly by DAIL (for the clinical eligibility piece) and the Department of Vermont Health Access (for the financial eligibility piece). I presented testimony related to the clinical eligibility piece, the Committee also requested to know the overall length of time it takes to complete eligibility determination, including both the clinical and financial pieces. Attached please find additional details provided by DVHA related to Long-Term Care Medicaid Eligibility Processing, including process improvements that have been made or are being considered, data related to the timely processing of applications and the outcome of applications processed.

- II. **Choices for Care MNG Eligibility:** The eligibility criteria and eligibility determination process are different for CFC MNG than they are for Long Term Care Medicaid. The following offers some clarity about the types of available services under MNG and the application process.
 - a. **Choices for Care MNG Services:** The following services are available through CFC MNG: case management, homemaker, adult day services and flexible funds.

 - b. **Choices for Care MNG Application Process:** Applications are completed at the local level and are sent to the certified Case Management Agency (either Home Health Agency or Area Agency on Aging) of the individual's choice. The case

manager then completes an assessment and clinical and financial eligibility screening. The case manager works closely with the other provider agencies to verify the availability of MNG funds and wait list information. A completed MNG application packet is submitted by the case manager to DAIL for authorization when the individual is ready to be enrolled. The application packet is reviewed by DAIL for completeness and to ensure eligibility. The provider will receive a signed "Service Authorization" from DAIL verifying enrollment in MNG services. Please see below for more information about the enrollment process.

- c. **Enrollment in CFC MNG:** Enrollment in the MNG is limited by the availability of funds. Applicants who meet both the clinical criteria and the financial criteria for the MNG (see below) may be enrolled in the program. If funds are unavailable, the names of any eligible applicants shall be placed on a waiting list, which is maintained by each local provider agency (Area Agency on Aging, Home Health Agency or Adult Day Center) and reported to DAIL on a monthly basis. Applicants on a waiting list are admitted on a first-come, first-served basis, by date that the application is received, as funds become available at each agency. Individuals who are categorically eligible for traditional Medicaid shall receive priority access to the MNG, based on the date that the application is received. Individuals who are not categorically eligible for traditional Medicaid shall be admitted as a second priority.
- d. **Choices for Care MNG Eligibility:**
 - i. **General Eligibility:** To be eligible for the CFC MNG an individual must:
 - 1. Be a Vermont resident age 18 or older and meet both the clinical and financial eligibility criteria; and
 - 2. Have a functional limitation resulting from a physical condition or associated with aging.
 - ii. **Clinical Eligibility Criteria:** Individuals who meet any of the following eligibility criteria shall be eligible for the Moderate Needs group and may be enrolled in the MNG, assuming they also meet the financial eligibility criteria:
 - 1. Individuals who require supervision or any physical assistance three (3) or more times in seven (7) days with any single Activity of Daily Living (ADL, e.g., bathing, eating, getting dressed) or Independent Activity of Daily Living (IADL, e.g., meal preparation, shopping, laundry), or any combination of ADLs and IADLs.
 - 2. Individuals who have impaired judgement or decision making skills that require general supervision on a daily basis.
 - 3. Individuals who require at least monthly monitoring for a chronic condition.
 - 4. Individuals whose health condition shall worsen if services are not provided or if services are discontinued.

iii. **Choices for Care MNG Financial Eligibility Criteria*:**

1. **Income Eligibility Criteria:** The income standard for the Moderate Needs group is met if the adjusted monthly income of the individual (and spouse, if any) is less than 300% of the supplemental security income (SSI) payment standard for one person (or couple) in the community after deducting recurring monthly medical expenses. Countable Income is all sources of income, including Social Security, SSI, retirement, pension, interest, VA benefits, wages, salaries, earnings and rental income, whether earned or unearned.
2. **Resource Eligibility Criteria:** The resource standard is met when all resources are less than or equal to \$10,000. Countable resources include: cash, savings, checking, certificates of deposit, money markets, stocks, bonds, trusts that an individual (or couple) owns and could easily convert to cash to be used for the individual's support and maintenance, even if the conversion results in the resource having a discounted value.

** If there is a question about whether or not resources or income are countable under this section, the Department shall apply the SSI-related community Medicaid financial eligibility rules.*

- e. **Redeterminations for CFC MNG:** Redeterminations of both clinical and financial eligibility for CFC MNG is conducted annually, or sooner if there is a change in the individual's situation. Redeterminations are conducted by the Case Management agency and then submitted to DAIL for review and approval.
- f. **Quality Assurance:** CFC MNG services are reviewed by DAIL as part of our broader CFC quality assurance activities. The review looks at accuracy and completeness of files as well as documentation that services were provided in accordance with the approval and overall quality of services provided.

Cc: Steven Constantino, Commissioner, DVHA
Camille George, Deputy Commissioner, DAIL

DVHA Long Term Care Medicaid Eligibility **July 2016 Application Processing Report**

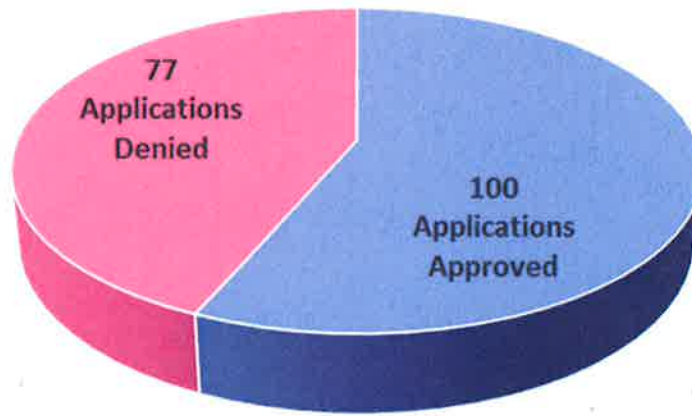
Process Improvements:

- January 2016, 90-day Reasonable Opportunity Period changed to the 10-day verification period.
 - Improved LTC eligibility processing times.
 - Clients more responsive to worker requests under the new rule.
 - Advocates report clients are more timely providing documents to them.
- LTC forms revised or deleted;
- Focus on LTC eligibility staff training;
- Increased contact with clients by phone for prompt resolution of verification questions;
- LTC staff turnovers reduced over past year;
- Increased collaboration with DAIL staff, advocates and nursing facility staff;
- Analysis and pursuit of available software applications for improved efficiencies and program integrity:
 - Lexus Nexus (available August 2016)
 - Medicaid Genius
 - Asset Verification System

Timely Processing of Applications – July 2016:

- Active LTC Medicaid Cases: **6,630**
- New Applications in Process: **595**
- Applications Processed in July: **177** (100 approvals; 77 denials)

July 2016 LTC Applications Processed Total 177



- July 2016 Average Days to Process: **68 days**
 - LTC Processing times have continued to improve over the past 7 months

Average Number of Days to Process

