

Long-Term Services and Supports (LTSS)

LTSS Screening

- Those who seek Medicaid payment for LTSS services must undergo a Screening to ensure they meet the level of care required for Medicaid to pay for those services.
- Pre-Admission Screening required for institutionalized, those receiving care in the community (waiver), and those receiving care through the Program for All-inclusive Care for the Elderly (PACE).
- Involves medical criteria, evaluation of activities of daily living, and mental health evaluation (especially for DD waivers).

Section 4

LTSS Transfer of Assets

- If an individual who is seeking LTSS services reduces resources in an unapproved way, s/he may be disqualified from Medicaid payment for LTSS.
 - This "Transfer of Asset" penalty applies only to LTSS services.
 - Medicaid may examine transfers of assets from within the last 5 years.
 - Disqualification period depends on uncompensated value of assets transferred.
- Certain transfers will not trigger a penalty, including certain trusts and/or transfers that directly benefit an applicant's spouse or dependent child.
- These policies are complex, seeking legal assistance is encouraged before navigating this process.

Section 4 & 5

LTSS Patient Pay

- ☛ **People in LTSS must contribute toward the cost of their care.** This is called "Patient Pay," and it is estimated as part of the LTSS Screening.
- ☛ From their income, they retain a small **Personal Maintenance Allowance (PMA)** for personal needs, such as clothing and other personal items.
 - Nursing home: \$40/month
 - CBC: \$1,508 in 2023; \$1,556 in 2024 (165% of SS)
- ☛ They can also get **deductions** for:
 - Home maintenance
 - Dependents
 - Non-covered medical/remedial expenses
 - LTSS insurance premium in first month of admission
- ☛ The **remainder of income after the above deductions** is paid to the LTSS provider.

Section 4

Spousal Impoverishment Rules

- ☛ When a **married individual becomes institutionalized, certain protections** are in place to **help** that individual's **spouse retain income and assets.**
- ☛ The "community spouse" can be living:
 - In the home with a spouse who is a Medicaid CBC patient,
 - In a residential institution such as an assisted living facility (ALF), or
 - In the institutionalized spouse's former home.
- ☛ The presence of a **community spouse** impacts both **eligibility**, and the **institutionalized spouse's Patient Pay.**
- ☛ Again, complex policies!

Section 4 & 5

MEDICAID WORKS



MEDICAID WORKS: Virginia's Medicaid Buy-In

- ☛ Some Virginians **enrolled in Medicaid** may have an option to **continue Medicaid** even if their **income rises** above the income limits (*138% FPL*), if they are:
 - Between 16 and 64 years old,
 - Disabled, and
 - working or wanting to work and have documentation from an employer establishing the date employment will begin
- ☛ MEDICAID WORKS applicants must meet resource requirements initially (*\$2,000, or \$3,000 if married*).
- ☛ May accrue **resources** in a **Work Incentive (WIN) account up to \$45,976**, and may have **income up to \$75,000/year**, so long as it is deposited in a WIN.

Section 4

Application & Term of Coverage: MEDICAID WORKS

- ☛ Application submitted **directly** to local DSS. Must sign a special agreement to initiate coverage.
- ☛ Coverage begins on the **1st day of the month after** application is processed and all requirements are met. Retroactive coverage is **not** available.
- ☛ Must remain employed, or actively seeking employment if employment is lost, to remain eligible.
- ☛ Annual renewal is required. Changes must be reported.
- ☛ If SSDI income increases due to COLA/work, difference must be deposited into the WIN account to remain eligible.
- ☛ May have to **eventually** pay a premium to DMAS each month, to remain covered.

Section 4

What if my Patient/Client has Questions?

- ☛ Local **Area Agencies on Aging** can provide guidance on Medicare/Medicaid issues, and help with Low-Income Subsidy (*LIS, or "Extra Help"*) issues
 - Virginia Insurance Counseling Assistance Program (*VICAP*)
 - **Long-Term Care Ombudsman**
- ☛ **Local Department of Social Services (LDSS)** caseworker
- ☛ **Legal Services Organizations** can often assist with questions, troubleshooting and appeals. See www.valegalaid.org; and www.lscv.org for office listings.
- ☛ **1-800-MEDICARE**


Section 5





- 📌 **Tool Kit** – hardcopy and online, updates indicated by (date)
- 📌 **Online, on-demand training modules**
 - Today’s curriculum divided into 20-30 minute sessions
 - Good for refresher or if have new employees, includes a post-test at end of each module
- 📌 **SignUpNow Outreach** – Quarterly eNewsletter
 - Program updates, tips, helpful information
- 📌 **Technical Assistance** – (804) 828-6062 or signupnow@vhcf.org

THANK YOU!



Please complete our online evaluation.
