

**Home and Community-Based Services (HCBS)
PDA Waiver Program
What is Fact and What is Fiction!**

Income

Count:

All Gross Income

This includes all earned and unearned income including Black Lung, White Lung and interest income earned on savings and/or checking accounts.

300% of Federal Benefit Rate for Supplemental Security Income
= \$2,022/month effective 1/1/09

Resources

Count:

Stocks /Bonds/Savings/Checking
Life Insurance
Irrevocable Burial Reserve
Revocable Burial Reserve

Actual Value of Funds
Face Value Exceeds \$1,500, count cash value over \$1,000
Amount of Reserve exceeding county established limit*
Amount of Reserve exceeding \$1,5000 (reduced by any excluded life Insurance policy – CAO will evaluate and determine)

Exclude:

Non-Resident Property (excluded in certain circumstances – CAO will evaluate and determine)
One Motor Vehicle per household (regardless of value)
Resident Property
All Burial Plots

Resource Limit:

\$8,000 (\$2,000 limit with \$6,000 disregard) \$40,000 for Bridge Program (Individual helps pay for service)

Other Information

Managed Care

Not all individuals who are eligible for Home and Community-Based Services (HCBS) participate in managed care.

Retroactive Coverage

An individual may qualify for retroactive eligibility for payment of HCBS and other health care services **IF** the individual meets **BOTH** the functional need for services **AND** meets the eligibility requirements for Medicaid.

Spend-Down Excess Resources

An individual can spend-down resources (dispose of the amount of resources that exceed the allowable limit for Medicaid) and qualify for payment of HCBS under Medicaid **IF** the resources are spent on items that will benefit the resources and still qualify for Medicaid are:

- Purchase of a television, appliances, home repairs, furniture, clothing for individual/spouse,
- Something that benefits the individual or his/her spouse, or
- Medical expenses of the individual or his/her spouse

Individuals can receive some HCBS as private paying if they do not qualify for Medicaid.

Funds for Burial

There is a limit on how much an individual can set aside in an irrevocable (an amount of money designated for an individual's burial that can only be accessible after the death of the individual) burial fund/reserve and be excluded for Medicaid purposes.

*Each county establishes its own burial limitation amount based on what is a reasonable cost for burial in that county. (Additional amounts over this limit can be set aside but must be specifically identified for what purpose and for what amount, for example, the cost to transport the individual's body to a community many miles away.)

Meeting Qualifications for More than One Home and Community-Based Program

An individual can qualify for more than one Waiver Program or a Long-Term Care Capitated Assistance Program (LTTTCAP) BUT can only receive services under one program at a time. The individual must choose one program to receive HCBS in his/her home.

Attendant Care Waiver and turning age 60

An individual who is receiving services under the Attendant Care Waiver can remain eligible for the Attendant Care Waiver after reaching the age of 60 IF the individual wants to remain in managed care. The individual can choose either the PDA Waiver, which is not in managed care (individuals participating in the Waiver Program are fee-for-service), or the Attendant Care Waiver, which is managed care.

Changes in Medical Needs or Financial Needs

The County Assistance Office (CAO) needs to be made aware of changes in an individual's eligibility for home and community-based services. Special Medicaid rules are used for authorizing Medicaid, eligibility for individuals in need of HCBS. Always contact the CAO when there is a change in an individual's circumstances even when changing from one Waiver Program/LTTTCAP to another Waiver Program/LTTTCAP. The CAO needs to properly identify which program is providing HCBS for an individual.

Medicare Savings Program

An individual who is found eligible for HCBS may qualify for payment (Buy-In) of his Medicare part A and/or B premium. The CAO will determine whether the individual meets the financial requirements. The income and resource limitations are lower than the special Medicaid rules for persons who qualify for HCBS. The CAO will notify the individual as to whether he/she is eligible for the Buy-In of his/her Medicare premium.

Services Provided Under the Medicaid Program Include:

<p>Doctors or Medical Personnel Certified Registered Nurse Practitioner Chiropractor Dentist Nurse Midwife Optometrist (Eye Doctor) Physician (Medical Doctor) Podiatrist (Foot Doctor) Physical Therapist ** Psychologist **</p>	<p>Outpatient Services Ambulatory Surgical center (ASC) and Short Procedure Unit (SPU) (same day surgery) Drug and Alcohol Services Federally Qualified Health Center Hospital Clinic Independent Medical/Surgical Center Psychiatric Clinic Psychiatric Partial Hospitalization Facility Renal Dialysis Center Rural Health Clinic</p>
<p>Inpatient Services Acute Care Hospital Drug and Alcohol Facility Private Intermediate Care Facility for the Mentally Retarded Private Intermediate Care Facility for other Related Conditions Psychiatric Facility Public Psychiatric Facility Rehabilitation Facility</p>	<p>Other Services Ambulance Family Planning Services Home Health (Visiting Nurse) Hospice Laboratory Medical Supplies Pharmacy (excludes medications for symptomatic relief of cold and cough) Portable X-ray Respite Care Transportation Services</p>
<p>Other Settings Nursing Facilities</p>	

** This only applies to those individuals who qualify for Medicare Benefits. The Medicaid Program pays these Medical Personnel, the Medicare deductible, and co-insurance only.

Home and Community Based Services Desk Guide

Waiver	Code	Functional Eligibility Requirements	Services Provided
<p>MA 0192 Waiver for Persons with AIDS or Symptomatic HIV Office of Medical Assistance Programs (OMAP) Contact: Carol Madara (717) 772-2525</p>	None	<ul style="list-style-type: none"> • Diagnosed as having AIDS or Symptomatic HIV • Not enrolled in a managed care organization, health insurance organization or Hospice Program • No age limit • Requires level of care provided in hospital, skilled nursing facility and intermediate Care facility • Not residing in an institution or inpatient setting 	<ul style="list-style-type: none"> • Home health aide visits beyond Medicaid coverage • Specialized medical equipment, supplies and nutritional supplements • Nutritional consultations • Homemaker services
<p>Elwyn Waiver Residents of Delaware County and Valley View Assisted Living ONLY Office of Medical Assistance Programs (OMAP) (717) 772-2525</p>	33	<ul style="list-style-type: none"> • Age 40 or older • Meets requirements for nursing facility level of care • Deaf and/or deaf-blind 	<ul style="list-style-type: none"> • Assisted Living Services: <ul style="list-style-type: none"> -Personal care -Home health care -Therapeutic, social and recreational programming -Special medical equipment and supplies -Transportation -Counseling
<p>Michael Dallas Waiver Program for Technology Dependent Individuals Office of Medical Assistance Programs (OMAP) (717) 772-2525</p>	78	<ul style="list-style-type: none"> • In need of nursing facility level of care as certified by physician • No age limit • Technology dependent (Dependence on a medical device to replace or compensate for a vital bodily function and to avert immediate threat to life) 	<ul style="list-style-type: none"> • Private duty nursing • Respite services • Attendant Care • Case management • Durable medical equipment • Medically necessary nutritional supplements
<p>Infants, Toddlers and Families Waiver Office of Mental Retardation (OMR) Contact: Deb Finer-Keytack (717) 783-5058</p>	70	<ul style="list-style-type: none"> • Between birth and age 3 • In need of early intervention services • Meet Intermediate Care Facility-Mental Retardation/Other Related Conditions level of care criteria established for waiver services 	<ul style="list-style-type: none"> • Habilitation, which is a service provided in home and community settings to assist individuals in acquiring, maintaining and improving self-help, domestic, socialization and adaptive skills.
<p>Person/Family Directed Support Waiver Office of Mental Retardation (OMR) Contact: Deb Finer-Keytack (717) 783-5058</p>	68	<ul style="list-style-type: none"> • Age 3 or older • Require an Intermediate Care Facility/Mental Retardation level of care • Sub-average intellectual functioning and impairments in adaptive behavior • Does not reside in a mental retardation licensed community residential home or a mental retardation licensed family living home 	<ul style="list-style-type: none"> • Homemaker/chore • Habilitation • Respite services • Physical adaptations • Visual mobility therapy • Behavioral therapy • Visiting nurse • Personal support • Adaptive appliances and equipment services • Extended State Plan services •

<p>Consolidated Waiver Office of Mental Retardation (OMR) Contact: Deb Finer-Keytack (717) 783-5058</p>	77	<ul style="list-style-type: none"> • Age 3 or older • Sub-average intellectual functioning and impairments in adaptive behavior • Require an Intermediate Care Facility/Mental Retardation level of care 	<ul style="list-style-type: none"> • Respite services • Community habilitation • Minor physical adaptations • Permanency planning services • Therapy services • Transportation
<p>OBRA Waiver Office of Social Programs (OSP) Contact: Patricia Ginter (717) 772-2094</p>	79	<ul style="list-style-type: none"> • Persons with developmental physical disabilities • Disability results in at least 3 substantial functional limitations • Disability manifested prior to age 22 • Disability is expected to continue indefinitely • Requires Intermediate Care Facility for Persons with Other Related Conditions level of care 	<ul style="list-style-type: none"> • Daily living services • Environmental adaptations • Assistive technology • Prevocational and educational services • Supported employment services • Community integration services • Respite services • Transportation
<p>Independence Waiver Office of Social Programs (OSP) Contact: Patricia Ginter (717) 772-2094</p>	42	<ul style="list-style-type: none"> • Persons with physical disabilities • Disability results in at least 3 substantial functional limitations • Disability is expected to continue indefinitely • Age 18 and older • Not dependent on mechanical ventilator supports • Requires Intermediate Care Facility 	<ul style="list-style-type: none"> • Daily living skills • Environmental adaptations • Assistive technology/specialized medical equipment and supplies • Community integration services • Respite services • Transportation
<p>Home and Community Based Waiver Program for Attendant Care Services (OSP/AC Waiver) Office of Social Programs (OSP) Contact: Gail Routsong (717) 705-5060</p>	40	<ul style="list-style-type: none"> • Ages 18 through 59 (Over age 50-Conditional) • Requires assistance with activities of daily living due to a medically determined physical impairment which can be expected to last for a continuous period of not less than 12 months • Mentally alert and capable of selecting, supervising, and if needed, firing an attendant, and managing their own financial and legal affairs • Be fund in need of a basic service 	<ul style="list-style-type: none"> • Basic services include: <ul style="list-style-type: none"> -Assistance with getting in and out of bed, wheelchair and/or motor vehicle -Assistance with performing activities of daily living such as bathing, personal hygiene, feeding and health maintenance activities
<p>COMMCARE Waiver Office of Social Programs (OSP) Contact Kim Cogan (717) 783-8182</p>	59	<ul style="list-style-type: none"> • Have a diagnosis of traumatic brain injury • Be age 21 and over • Need Special Rehabilitation Level of Care • Not dependent on mechanical ventilator supports • Disability results in at least 3 substantial functional limitations 	<ul style="list-style-type: none"> • Coaching/cueing • Cognitive therapy • Environmental adaptations • Assistive technology/specialized medical equipment and supplies • Community integration • Respite care • Transportation • Personal care services • Supported employment services • Educational services

<p>Pennsylvania Department of Aging Waiver (PDA) Contact: Kelly Allen (717) 787-6207</p>	<p>38</p>	<ul style="list-style-type: none"> • Age 60 or older • Meet nursing facility level of care criteria • Wish to be treated in own home or other community setting 	<ul style="list-style-type: none"> • Adult Day Services Center • Attendant Care • Counseling • Environmental modifications • Home health care • Specialized medical equipment and supplies • Companion services • Respite care • Transportation • Home delivered meals • Extended physician services • Personal care services • Personal emergency response system
<p>Long Term Care Capitated Assistance Program (LTCCAP) Office of Medical Assistance Programs (OMAP) In Allegheny, Beaver, and Philadelphia Counties ONLY Contact: Cindy Proper (717) 772-2525</p>	<p>96</p>	<ul style="list-style-type: none"> • Age 60 and over (Age 55-Conditional) • Meet eligibility requirements for nursing facility level of care • Able to safely live in the community with services available through the provider • Reside in locations where services are available 	<ul style="list-style-type: none"> • Adult day health services • Transportation/escort services • Primary medical specialist care • Nursing care/skilled nursing care • Dental, vision, podiatry, audiology care • Social services/case management • Physical, occupational, speech therapies • Recreational therapy • Nutritional counseling/education • Laboratory/diagnostic test x-rays • Drugs and biologicals • Prosthetics, orthotics, durable medical equipment and supplies • Psychiatric services • Personal care • Homemaker chore services • Home delivered meals • Hospital care/hospice services • Nursing facility services • Services for hearing/speech impairments • Translation services