

## **Changes mean more Ohioans can access Assisted Living waiver** ***Barriers to enrollment removed***

Elders and others statewide can access Ohio's Assisted Living waiver more quickly thanks to recent program changes. Anyone living in the community can now access the program. A second change means that eligible consumers can begin receiving assisted living services while their Medicaid eligibility is being determined.

The Assisted Living Waiver program pays the costs of care in an assisted living facility for certain people with Medicaid, allowing the consumer to use his or her resources to cover "room and board" expenses. Services include 24 hour on-site response, personal care, supportive services (housekeeping, laundry, and maintenance), nursing, and transportation, meals and recreational programming.

The Unified Long-term Care Workgroup identified equal access to all long-term care services and supports, including Medicaid waivers, as essential to further re-balance the long-term care service system. Acting on recommendations from the Unified Long-term Care Workgroup (<http://aging.ohio.gov/information/ultcb/>), the Ohio Department of Aging received approval from the Centers for Medicare & Medicaid Services to offer enrollment to any eligible individual.

These changes bring the enrollment process for the Assisted Living waiver in line with PASSPORT, which does not require consumers to live in nursing or residential care facilities for six months or participate in a Medicaid waiver program before enrolling. State-funded services, also known as presumptive enrollment, have been available through PASSPORT since 1990. While it is available in other states, the department is leading the way in Ohio with state-funded services. No other Ohio waiver has presumptive enrollment.

Effective Sept. 29, 2011, eligible individuals may be offered enrollment in the state-funded component of the Assisted Living program, if the PASSPORT Administrative Agency (PAA) has determined that the individual meets all the other eligibility criteria, as they wait for the final determination of their Medicaid eligibility from the county Department of Job and Family Services.

The PAA uses an in-person assessment and completes a financial information worksheet to determine if an individual meets all the eligibility criteria. Using the financial information worksheet ensures that decisions about presumed Medicaid financial eligibility are made consistently across the state.

The PAA can offer enrollment to any individual who meets the non-financial eligibility criteria and who:

- Has a total gross income that is less than the current institutional need standard (\$2,022);
- Is married and has total assets that are less than the current asset standard (\$1,500);
- Does not have a trust of any type;
- Has not transferred resources within the last 60 months;
- Has an estimated client liability that does not exceed the estimated costs of care; and
- Agrees in writing to pay the estimated monthly client liability, calculated by the PAA.

A person may remain on the state-funded program for only three months. The PAA will help the consumer explore other care options and transition to a different care setting if the individual is

not approved for the Medicaid-funded Assisted Living waiver program. An individual who is either denied enrollment in the state-funded assisted living program or ceases to meet the eligibility criteria after enrollment will have the opportunity for a hearing with the Legal department at the Department of Aging.

Nearly 3,200 Ohioans currently use the Assisted Living waiver. For more information, call 1-866-243-5678 to contact your PASSPORT Administrative Agency.