

Am I Eligible for a Medicaid Waiver?

Did you know an individual with a brain injury could be eligible for a Virginia Medicaid Waiver?

The Commonwealth Coordinated Care Plus Waiver (CCC): For people with a disability of any age or people 65 years or older. To qualify, an individual needs to undergo a screening and meet eligibility criteria for:

- Functional Needs
- Medical Nursing Needs
- Risk of Nursing Facility Placement
- Financial Limits

Screening: Conducted by the Pre-admission Screening Team from your Local Department of Social Services and Department of Health. If the individual is in a hospital, the hospital should conduct the screening. There is no waiting list for this Medicaid Waiver.

What you need to know about the screening: If possible; a family member, caregiver, or case manager should attend the screening.

This is not the time to discuss the things you/the individual can do well; you must be honest about the types and amount of support needed. Discuss the challenges you/ the individual has completing tasks and the type of supports needed to complete activities. Be sure to share all the details – verbal prompts or structuring is needed, the amount of physical assistance that is needed, if the individual needs to be monitoring for safety/supervision.

Some examples include:

- The individual will get up in the middle of the night and wonder around the house, he is difficult to reason with and has left the house, yelling with no understanding of where he is and has gotten lost.
- The individual is anxious asking the same questions continuously, he is easily upset and has crying spells. He is not willing to be around others.
- The individual needs ongoing monitoring to assure he is drinking enough fluids. His multiple medical conditions and the medication he is on can cause dehydration and diarrhea.

Documentation can help with getting services approved:

- A Physical Therapist can provide documentation about your/ the individual's ability to navigate curbs or stairs independently is this person a fall risk?
- An Occupational Therapist can provide documentation about your/the individual's ability to dress on their own, fastening buttons and zippers prepare a meal cutting food into safe size to prevent choking, being able to hold a glass and bring it to their mouth.
- A physician can provide documentation regarding your/ the individual's medical conditions and how these conditions need to be observed and monitored to prevent destabilization due to the individual's inability to recognize when a medical professional should be called.

The screening tool used to determine eligibility is the Uniform Assessment Instrument (UAI). View it at Virginia Uniform Assessment Instrument.

The UAI is a multi-dimensional evaluation for individual functioning. The UAI is designed to gather information about the individual, including needs and strengths. The four major content areas include Identification/background, Functional Status, Physical Health Assessment and Psychosocial Assessment.

1. Financial Limits

You do not have to submit a Medicaid application prior to the screening. Benefits are determined by the individual's income level, which is currently set at 300% of the current Supplemental Security Income (SSI) payment standard for one person. Financial considerations for Medicaid are based on the individual's income not the family's income.

2. Functional Needs

- a. Activities of daily living (bathing, dressing, toileting, eating)
- b. Behavior and orientation (awareness of a person within their environment in relation to time, place, and person)
- c. Mobility (ability to get around walking, wheeling, climbing stairs)
- d. Joint motion
- e. Medication administration

An applicant must need human (not solely mechanical) assistance with 2-4 activities of activities of daily living (ADLs), as well as be semi-dependent in behavior and orientation (often, but not exclusively, due to dementia), as well as semi-dependent in joint motion or semi-dependent in medication administration.

OR Dependent in 5-7 ADLs, plus dependent immobility

OR Semi-dependent in 2-7 ADLs, as well as dependent in mobility, as well as dependent in behavior and orientation (often, but not exclusively, severe dementia).

3. Medical Nursing Needs

Have medical nursing needs to be provided by a skilled nurse beyond custodial care. Examples of these needs (but not an exclusive list) are:

- Oxygen administration and respiratory therapy
- Routine care of catheter, colostomy or ileostomy
- Routine skin care to prevent rashes and pressure ulcers
- Care of small uncomplicated pressure ulcers and local skin rashes
- Sensory, metabolic, or circulatory impairment
- Therapeutic exercise and positioning (ROM exercises)
- Chemotherapy and/or radiation
- Dialysis
- Suctioning
- Tracheostomy care
- Use of physical or chemical restraints
- Supervision for adequate nutrition and hydration
- Need for observation/assessment to prevent destabilization

4. Risk of Nursing Facility Placement

To qualify, you or the individual must be considered "At Risk" for nursing facility placement. "At Risk" means there is a need for the level of care that is provided in a hospital, nursing facility and if the individual does not receive the community based services provided by the waiver, they would need to be admitted to a facility. This does not mean that the person is going to be placed in one of these settings.

To apply for Medicaid, you can:

- Apply online at https://commonhelp.virginia.gov.
- . Need help? Contact the Enterprise Call Center at 855-635-4370.
- Apply online at the Health Insurance Marketplace at healthcare.gov.
- To complete a Medicaid paper application to take to your local Department of Social Services <u>go here.</u>

If eligible, covered services include:

- Adult Day Health Care
- Assistive Technology (\$5,000 a year)
- Environmental Modifications (\$5,000 a year)
- Personal Care Services
- Personal Emergency Response System
- Private Duty Nursing
- Respite (480 hours a year)
- Transition Services for people moving out of an institution into the community (\$5,000 lifetime max)

Appeal: You or the individual has the right to challenge Medicaid's decisions and actions. Appeals must be requested within 30 days of the decision or action; the decision on the appeal should be issued by the Hearing Officer within 90 days. View Virginia Medicaid Appeal Overview.

The Virginia Developmental Disability Home and Community-Based Services (HCBS) Waivers:

Are for an individual who experiences a developmental disability. Someone who sustains a severe brain injury prior to their 22nd birthday which has a lasting impact on their development could be eligible.

A Developmental Disability is:

- A severe chronic disability
- Attributable to a condition, other than mental illness
- Manifested before the age of 22
- Likely to continue indefinitely
- Results in substantial limitations in 3 or more major life activities

The three Developmental Disability Waivers are:

- Building Independence Waiver
- Community Living Waiver

Family and Individual Support Waiver

Screening: Done by your local Community Services Board (CSB) or Behavioral Health Authority (BHA). The screening tool is the Virginia Individual DD eligibility Survey (VIDES). It assesses life activities, and individuals must have needs in 3 or more areas. There is a waiting list for these waivers. You may receive the CCC Plus Waiver, if eligible, while on the waiting list for a DD Waiver.

What you need to know about the screening: If possible; a family member, caregiver or case manager should attend the screening. And again, this is not the time to discuss the things you/ individual can do well; you must be honest about the types and amount of support need ed. And be sure to share all the details – verbal prompts, structuring or physical assistance, monitoring for safety/supervision; is it total assistance, daily or less than that?

Some examples are:

- ï The individual needs regular supervision to ensure compliance with medication
- ï administration and management of his chronic dysphasia.
- i The individual is rarely able to understand simple requests or directions without having them repeated and explained in great detail. Often, they are unable to name common people, places or things correctly.

The areas of Life Activities are:

- Health Status
- Communication
- Task Learning Skills
- Personal/Self Care
- Motor Skills
- Behavior
- Community Living Skills
- Self-Direction

Documentation: Depending on the situation, it can be difficult to obtain medical documentation that a brain injury has occurred. For more details on this, view our How to Document a Brain Injury for Service Eligibility Quick Guide.

Appeal: You or the individual has the right to challenge Medicaid's decisions and actions. Appeals must be requested within 30 days of the decision or action; the decision on the appeal should be issued by the Hearing Officer within 90 days. <u>View Virginia Medicaid Appeal Overview</u>. The Disability Law Center will provide help if your waiver application is denied. Contact them at 800-552-3962 or http://www.dlcv.org/get-help.

Financial Limits

You do not have to submit a Medicaid application prior to the screening. An Eligibility Worker from the local Department of Social Services determines an individual's financial eligibility; they use different Medicaid eligibility rules for waivers, which often allow people to qualify for Medicaid who may not qualify under the traditional Medicaid eligibility rules. Benefits are determined by the individual's income level, which is currently set at 300% of the current Supplemental Security Income (SSI) payment standard for one person. Financial considerations for Medicaid are based on the individual's

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Resources:

- My Life My Community Website
- Navigating the Developmental Disability Waivers
- VIDES Adult
- Community Services Boards

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