State of Delaware Long Term Supports & Services (LTSS)

Administered Under 1115 Waiver Authority

Delaware Long Term Supports and Services

Where can you receive LTSS Care?

- Home and Community Based Services (HCBS)
  - Assisted Living Facility
  - In your home
- Skilled Nursing Facility
- Physician Prescribed All-Inclusive Care for the Elderly (PACE)

State of Delaware Benefit Package

DSHP Benefits

- Acute Care Services
- In/Outpatient Hospitalization
- 30 days Nursing Facility Care
- Behavioral Health
- Care Coordination
- Durable Medical Equipment
- Physician Services
- Lab & Radiology Services
- Private Duty Nursing
- Home Health Services
- Limited Adult Dental Services
- Child Dental
- Non-Emergency Medical Transportation
- Day Habilitation Services for DD Pop.

MLTSS Plus Benefits

- Case Management Services
- Nursing Facility Care
- Assisted Living Facility Care
- Chore Services
- Respite Care
- Home Delivered Meals
- Day Habilitation
- Cognitive Services for ABI Pop.
- Consumer Directed Attendant Care
- MFP Transition Services
- Adult Day Services
- Emergency Response System
- Nutritional Supplements for the AIDS Pop.
- Minor Home Modifications
- Specialized Medical Equipment

DDDS Lifespan Waiver

Approved effective July 1, 2017

Formerly known as the DDDS Home and Community Based Waiver (HCBS waiver)

What services are available through the Lifespan Waiver?

- Day Habilitation
  - Day Habilitation – Community Participation
- Prevocational Services
- Supported Employment - Individual
- Supported Employment - Group
- Personal Care
- Respite
- Assistive Technology (not otherwise covered by Medicaid)

There's more…

Services continued:

- Behavioral Consultation
- Nursing Consultation
- Community Transition
- Home or Vehicle Adaptations
- Specialized Medical Equipment and Supplies (not otherwise covered by Medicaid)
- Residential Services-Including Medical Residential Habilitation
- Supported Living

And ….

Service Enhancements:

In an amendment to the waiver effective 10.1.2022, DDDS added a reimbursement rate for Day Habilitation, Community Participation, Pre-Vocational, Supported Employment, and Residential Habilitation services for staff that are ASL fluent or certified that work with Deaf service recipients who use ASL to communicate.

DDDS also added a reimbursement rate for staff that are Registered Behavior Technicians when they work with service recipients that have an increased behavioral support need.

Lifespan Waiver Eligibility

The Individual must:

- Qualify for the Division of Developmental Disabilities Services
- Meet the Level of Care (Need some varying level of support in two of these categories: Activities of Daily Living, Safety, Household Activities, Community Access, Maintain Relationships, Health Maintenance, Communication, Psychological)
- Meet the Financial Criteria – The Division of Medicaid and Medical Assistance(DMMA)determines whether financial criteria is met)

Lifespan Waiver - Financial Eligibility

- Monthly Income-An individual can make no more than **250%** of the SSI standard. Approximately $1,985.00 a month. (Examples of income include: Social Security Benefits, Veteran's benefits, alimony, employment wages, pension payments, dividends from bonds or stocks, interest payments, IRA distributions, and estate income.)
- Resources-An individual cannot have more than $2000 in resources. (Examples of resources include; bank accounts, CDs, owning property (other than residence), whole life insurance, 401K, i.e.)

The Waiver applicant must be eligible for Medicaid. This is how services are paid for. The Lifespan Waiver application is an application for Medicaid.

? What if a person is over the allowable income ?

A person that has an income greater than what Medicaid allows but that does not have the income to pay for the cost of services may benefit from a Qualified Income Trust, also known as a Miller Trust.

What is that ?

A Qualified Income Trust, or Miller Trust, is an irrevocable trust (cannot be changed or altered) that makes it possible for someone to become income eligible for Medicaid.

? What if a person is over resource ?

The resource limit in Delaware for Medicaid eligibility is $2,000. If a person has more than $2,000 in assets and resources they may be “over resourced” and would need to become eligible for Medicaid to access Waivered Services.

An **irrevocable trust** can be established for any resource over $2,000. A trust is created when property (real estate, finances, tangible items) is managed by a person (the Trustee) for the benefit of another person (the Beneficiary).

- Income and assets that are listed in an irrevocable trust do not count as qualified income of the Beneficiary when applying for Government Assistance such as Medicaid

Becoming Eligible…

Every person's financial situation and needs are different. Consulting with an Elder Lawyer or Financial Planner with specialty in trusts and Medicaid/estate planning is the best way to ensure that you are planning appropriately and in the best interest of your loved one.

There are mechanisms to help individuals become financially eligible for Medicaid. You must be eligible for Medicaid in order to be eligible to receive the supports and services that it pays for.

The **Delaware Aging and Disability Resource Center (ADRC)** has a resource guide to assist you in identifying qualified Elder Lawyers and Medicaid Planners.

www.dhss.Delaware.gov/dhss/dsaapd/adrc.html

Comparison Chart LTSS/Lifespan Benefits

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Case Management from a qualified MCO case manager	**Targeted Case Management from a qualified Community Navigator or DDDS Support Coordinator**
Choice of where you Live: In Your Own Home Assisted Living Facilities Nursing Care Facility	Residential Habilitation (in the following settings): • Neighborhood Group Home • Community Living Arrangement • Shared Living
Transition Services- If you are moving out of a nursing facility to the community, you might be able to get help with expenses to move. You can only use what you need to move, **but only $2,500 or less for each move.** Value Add services provided by MCO and increase this benefit	**Community Transition Service-**You can get this service if you are moving into the community from an institution or if you are moving into your own home from a setting where a DDDS provider managed your care. Limits: You cannot get **any more than $4,000 per person every 10 years**
Respite You can get this kind of service at home and in Nursing and Assisted Living Facilities. **Limitations: Usually, you can only get up to fourteen (14) days of this kind of help during each year.**	**Respite** You can get this kind of service in your home, at a respite camp, in a shared living home or at a home managed by a DDDS-approved provider. **For people with significant medical needs, you may also be able to get facility-based respite for up to 15 days in a year.** **Limits: You can only spend up to $3,500 (this is a combined benefit amount with personal care) each year**.

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Minor Home Modifications Changes that can be made to your home so that you can keep living there instead of moving to a nursing home or other care facility. **You can get up to $6,000 for each project; or $10,000 per year; and $20,000 in your whole life.**	**Minor Home Modifications** Changes that can be made to your home so that you can keep living there instead of moving to a nursing home or other care facility. **Limits: $6,000 per person every 5 years for home and vehicle modifications combined.**
Adult Day Services – These are services you get in the community, and they can be related to health or to forming relationships that are needed to help you be as healthy and safe and independent as you can be. You can get meals as part of this service, but not all 3 meals in the day. If you need physical, occupational or speech therapies, and they are written in your personal plan, you can get them as part of this service.	**Adult Day Services-not covered in this program**
Pre-vocational Service – not covered in this program	**Pre-vocational Service** - Prevocational Services provide learning and work experiences, including volunteer work and/or internships, where you can learn things to increase your strengths and skills that will help you get a job in your community where you can get paid. Prevocational services can happen at a provider's site or in the community. If you get this service, you must have goals related to finding a job or learning things that will help you get a job and the things you do must be designed to support your goals.

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Supported Employment – not covered in this program	**<u>Supported Employment</u> -** This service is for one person or a small group and helps people to get and keep a job in the community, or get a customized job, or become self-employed. The goal of this service is for you to be working in your community, not separated from it, in the general workforce and for you to be paid at least minimum wage and as much as other people without disabilities who are doing the same job.
<u>Cognitive Services for individuals who exhibit cognitive deficits</u> This service is to figure out the best way to help people who may have problems with how they learn or think or who may have trouble getting along with others such as those that are exhibited as a result of a brain injury. Specially trained professionals can figure out how you are doing now and how you can learn new things to help you in the future based on understanding how you think, how your brain is working now, how you are taking care of yourself and the best ways to help you manage your behavior and thoughts.	**<u>Behavioral Consultation</u> –** This service helps people to figure out what is causing you trouble so that you might not be able to stay in the community and help you to figure out other ways to do things. A professional will develop a *behavior support plan* for you, to help manage your behavior by helping you and your family with learning new ways to do things. The behavior support plan will help you to do fewer of the things that are causing you challenges and help you do more things that will make your life better so that you can keep living in your community.

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Cognitive Services for individuals who exhibit cognitive deficits –continued These professionals can provide: - Individual and group therapy - Individual activity therapies - Family counseling (to help with your condition) - Diagnostic services to measure how you are doing Limitations: You can only have twenty (20) visits each year, plus an appointment to see how you are doing when you begin receiving this service.	**Behavioral Consultation – continued** Please note that this is a *consultative* service and not a *direct* therapy service. It is not the same as getting "behavioral or cognitive therapy".
Emergency Response System - A Personal Emergency Response System (PERS) is something you can keep with you that will let you call for help in an emergency. The button is hooked up with your phone and can call Emergency Services for help when you push the button.	**Emergency Response System-not covered in this program**

Comparison Chart LTSS/Lifespan Benefits

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Support for Consumer Direction **Personal Care/Attendant Services** You can decide that you want to be the one to make the decisions about your Personal Care/Attendant services. You will learn how to manage your supports and do the same things you would do if you were the boss of your personal care attendants. This means you will get help to: Learn how to manage your service budget and Learn to manage the staff who support you	**Support for Consumer Direction *** **Personal Care and Respite can be self-directed.** You can decide that you want to be the one to make the decisions about your Personal Care/Attendant services. You will learn how to manage your supports and do the same things you would do if you were the boss of your personal care attendants. This means you will get help to: Make decisions about how to get the personal care and respite that you need Learn to manage the staff who support you
Independent Activities of Daily Living (chore) Services Chore services constitute housekeeping services that include assistance with shopping, meal preparation, light housekeeping, and laundry.	**Independent Activities of Daily Living (chore) Services - not covered in this program.**

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Assistive technology assessment and equipment-not covered in this program	**Assistive Technology** means something that helps you to do more things for yourself or do the things you can already do better including communicating with others. Assistive technology includes-- (A) Figuring out what needs you have. (B) Buying or leasing equipment or devices that can help you live more independently. (C) Making sure that this is the right equipment for you and that you and your family or other caregivers know how to use it. (D) Hearing aids are covered under Assistive technology, which includes Audiologists and hearing aid dispensers Limits: $500 per year for equipment, including what you need to take care of your equipment.
Vehicle Adaptations - not covered in this program	**Vehicle Adaptations-** Changes to your vehicle that are needed for you to get around in your community and to make sure you are as healthy and safe as possible. They include changes to the car/van that is your most-used vehicle for getting to and from places in the community that you need to help with your transportation. Limits: $6,000 per person every 5 years for home and vehicle modifications combined.

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Personal Care/Attendant Care Services – Personal care includes help you need with day-to-day activities like bathing, dressing, staying clean, moving yourself in and out of bed or a chair, using the bathroom, skin care, eating and help with getting around. When your plan of care says you need it, this may also include: Light house-work, chores, shopping, planning and cooking meals. This kind of help must be something you really need so that you can be as healthy and safe as possible.	Personal Care Services * – Personal care includes help you might need to do things for yourself that everyone has to do for themselves. This might mean that someone does something for you, or helps you with parts of it, or they remind you to do it. Limits: You can only spend up to $3,500 (this is a combined benefit amount inclusive of respite) per person each year for this kind of help. People who live in a place where this service is already given by paid supports (Neighborhood Group Home, Staffed Apartment) cannot get more of this service added on. If you are not in this program for a whole year, then only the part of the money you spent for the time you were in the program will be counted against your limit. You may be able to get more of this service if DDDS agrees that you really need it for you to stay healthy and safe.

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Nurse Consultation - not covered in this program	**Nurse Consultation –** The Nurse Consultant will help figure out your health situation and will help keep track of your health care needs. People who use this service live in the community and have a prescribed medical treatment plan. The Nurse Consultant will help speak up for your medical care and will help keep your health supports organized. This service helps your caregivers to carry out your individual treatment/support plan and improves their ability to take care of your health needs. This IS NOT a direct nursing service.
Home-delivered Meals (1 meal per day). The MCO case manager must arrange for delivery of these meals with staff at the Division of Services for Aging & Adults with Physical Disabilities (DSAAPD) who authorize this service	**Home-delivered Meals - not covered in this program**

Diamond State Health Plan Plus Benefits	DDDS Lifespan Waiver Benefits
Out of Home Living Options that may be available to you-	**Out of Home Living Options that may be available to you-**
Assisted Living Facilities- *(A place to live in your community where you can have medical and/or day-to-day help when you need it and people will check on you often)* Nursing Care Facility- *(A place where you can get a lot of medical help and care if you have a lot of health needs)*	Residential Habilitation (in the following settings): Neighborhood Group Home *(A place to live where you will have roommates and paid support staff to help you when you need it.)* Community Living Arrangement *(A place where you can live with or without roommates in an apartment and will have paid staff to help you, but not all the time – only when you need the help)* Shared Living *(A place to live with a family who will help you when you need it)*
Vehicle Adaptations - not covered in this program	**Vehicle Adaptations-** Changes to your vehicle that are needed for you to get around in your community and to make sure you are as healthy and safe as possible. They include changes to the car/van that is your most-used vehicle for getting to and from places in the community that you need to help with your transportation. Limits: $6,000 per person every 5 years for home and vehicle modifications combined.

I am enrolled in the DSHP Plus(LTSS) Program, can I enroll in the Lifespan Waiver?

- **No.** Individuals cannot be enrolled in both the Plus program and the Lifespan Waiver at the same time. Some services are available under both options, but not all.

- Your MCO Case Manager is the primary contact for needed services and supports.

HOWEVER

- DDDS has a Family Resource Coordinator for individuals receiving LTSS to assist families with DDDS specific support needs.

Questions submitted in registration for LTSS vs. Lifespan Waiver Session:

1. What are considered home modifications? Is a ceiling lift a qualified modification?

Answer: Installation of certain home mobility aids such as wheelchair ramps, handrails, grab bars, widening of doorways, modifications to bathrooms are included in the MHM benefit. Ceiling lifts may be approved when medically necessary if is determined a DME item such as a mechanical floor lift does not meet the member's needs.

2. I have Medicare (primary) and LTSS waiver. how do coordination of benefits work?

Answer: The member's assigned LTSS Case Manager is responsible for coordinating benefits with primary insurance such as Medicare.

3. I need a supply, piece of equipment, medical need and it is my standard of care for multiple years as ordered by doctor to maintain health. It is covered by Medicare but not entirely how do I coordinate with MCO?

Answer: The LTSS CM will assist with coordinating benefits

4. If company accepts Medicaid as a payer, can I ever be "balanced billed"?

Answer: LTSS members should not be balanced billed by Medicaid providers

5. Does LTSS cover medication co-pays if you have Medicare Part D primary?

Answer: No, Medicaid doesn't cover Medicare Part D co-pays.

6. like to know who will be left out of LTSS that may need LTSS. who will be left out of services that may need those services of the Lifespan Waiver.

Answer: Members must qualify Medically and Financially for LTSS services.

7. Does LTSS pay for day programming services or does DDDS still need to cover cost?

Answer: LTSS benefit includes adult day services and Day Habilitation for people with acquired brain injury. The LTSS CM is responsible for coordinating services with both participating providers, non-participating providers, and State services such as those provided by DDDS.

Thank you!
Questions?