

# Policy Transmittal Aging and People with Disabilities



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**Authorized signature**

**Number:** APD-PT-19-010

**Issue date:** 3/7/2019

**Topic:** Long Term Care

**Due date:**

**Transmitting (check the box that best applies):**

- New policy   
  Policy change   
  Policy clarification   
  Executive letter  
 Administrative Rule   
  Manual update   
  Other:

**Applies to (check all that apply):**

- |                                                                        |                                                                               |
|------------------------------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> All DHS employees                             | <input type="checkbox"/> County Mental Health Directors                       |
| <input checked="" type="checkbox"/> Area Agencies on Aging: Type B     | <input type="checkbox"/> Health Services                                      |
| <input checked="" type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Office of Developmental Disabilities Services (ODDS) |
| <input type="checkbox"/> Self Sufficiency Programs                     | <input type="checkbox"/> ODDS Children’s Intensive In Home Services           |
| <input type="checkbox"/> County DD program managers                    | <input type="checkbox"/> Stabilization and Crisis Unit (SACU)                 |
| <input type="checkbox"/> ODDS Children’s Residential Services          | <input type="checkbox"/> Other ( <i>please specify</i> ):                     |
| <input type="checkbox"/> Child Welfare Programs                        |                                                                               |

<b>Policy/rule title:</b>	Extended Waiver Eligibility (EWE) Clarifications		
<b>Policy/rule number(s):</b>	411-015-0030	<b>Release number:</b>	
<b>Effective date:</b>	Upon release	<b>Expiration date:</b>	
<b>References:</b>			
<b>Web address:</b>	<a href="http://www.dhs.state.or.us/policy/spd/rules/411_015.pdf">http://www.dhs.state.or.us/policy/spd/rules/411_015.pdf</a>		

**Discussion/interpretation:**

Aging and People with Disabilities (APD) is replacing [APD-PT-17-038](#) with this transmittal to set new policy and clarify existing policy for the Extended Waiver Eligibility (EWE) program.

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### **EWE Policy**

Individuals receiving Medicaid funded Long Term Services and Supports (LTSS) that are determined to no longer meet SPL 1-13 per Oregon Administrative Rule ([OAR](#)) [411-015-0015](#)(1)(a) may qualify for EWE per OAR [411-015-0030](#).

**All individuals re-assessed above SPL 13 must be evaluated for EWE. The final decision must be communicated on the Service Plan and Notice (SPAN) form 2780N.**

### **Updated: SPL**

EWE now includes individuals assessed at SPL 18. When an individual is currently receiving LTSS and is re-assessed at SPL 14-**18** (*previously SPL 14-17*) and is determined to be at risk for hospitalization or institutionalization within 30 days of LTSS ending (see “Evaluation” section below), a request should be sent to Central Office.

**Please note:** An individual that has requested an Administrative Hearing, but has not had the actual hearing, must be offered the opportunity to apply for EWE if their re-assessment resulted in SPL 18.

An amended SPAN will be needed to report the outcome of the EWE determination.

Additionally, if the individual is approved for EWE, the individual will have to decide if they wish to continue pursuing the Administrative Hearing process. The individual can pursue the hearing AND receive EWE at the same time.

Individuals that have had an Administrative Hearing will not be impacted by this change.

## **NEW: MAGI Eligible Individuals and EWE**

MAGI eligible individuals assessed as SPL 14-18 are not eligible for EWE. EWE is only available for individuals in the Waiver. MAGI consumers do not qualify for the waiver.

In order to assist MAGI consumers to access EWE, a referral must be made to follow the [PMDDT Expedited process](#).

- Individuals who are determined ineligible through the PMDDT process are not eligible for EWE services, though they may continue to be MAGI eligible.
- If an individual is determined eligible through by PMDDT, they become OSIPM eligible and may receive EWE services.

MAGI individuals that were approved for EWE services prior to the rule change will need to go through the PMDDT expedited process. If PMDDT does not approve the application, CO will continue to work with the local office on how to manage on a case by case basis.

## **Evaluation for EWE**

- The case manager (CM) completes a Title XIX assessment for an existing consumer receiving LTSS services resulting in a SPL of 14-18.
- The CM must review eligibility for all other programs prior to submitting a request for EWE. Options may include:
  - State Plan Personal Care ([SPPC](#));
  - Oregon Project Independence ([OPI](#));
  - Emergency Response Systems ([ERS](#));
  - Home Delivered Meals ([HDM](#)) through the Older Americans Act (OAA);
  - [Community-Based Transition Services](#);
  - Non-APD programs, such as: Tribal resources, housing assistance, energy assistance, senior centers, Veterans Affairs, etc.; and
  - Natural Supports (which may include providing safe and secure housing).
- Then the CM assesses the individual's risk of institutionalization or hospitalization within 30 days of APD services ending per the criteria established in OAR 411-015-0030(1)(a)-(c):
  - (a) Lack of access to shelter and support would cause the individual to deteriorate or decompensate;
  - (b) Without supports, the individual would lack access to safe housing or has a documented history of eviction or threats of eviction that would lead the individual to deteriorate or decompensate; or
  - (c) Without supports, the individual is at significant risk of abuse or exploitation.

- If the individual has one or more of the above risks; the CM completes the steps below.
- If the individual does not meet the EWE criteria, the SPAN should be issued. The SPAN should not be issued until an EWE (and other program decisions) has been made.

### **Local Office Processing and CO Review**

- Complete the first and third page of the new [EWE Planning Form](#). Document the potential risks, steps to mitigate the risks, who will be assisting the individual, and when the steps will be completed.
  - NOTE: The EWE Planning form requires an individual/rep and CM signature. If the individual does not sign the form, a pending notice should be sent. If there is no response to the pending notice, services may be closed, using timely notice standards, for not completing the assessment process.**
- Review the information on the form with a supervisor/lead worker before submitting to CO.
- If approved, the supervisor/lead will send the request to the EWE email at [APD.EWE.Request@State.OR.US](mailto:APD.EWE.Request@State.OR.US).
  - In the subject line, note that this is a new EWE request. In the body of the email be sure to include:
    - Individual Prime
    - Individual First and Last Name
    - The date EWE needs to start in the Mainframe (MF).
- The EWE policy analyst (PA) will review the case for completeness and eligibility.
- Approved requests must be coded in the Mainframe by CO. Staff are not able to code the case, including creating a benefit in Oregon ACCESS. The EWE analyst will document the approval in OA when coding has been completed. The CM must complete a SPAN and one of the following actions:
  - If the individual is receiving in-home home services, a “Notice of Eligibility and Responsibility” (form 541) must be issued to inform the individual of their eligibility to receive 10 hours of care per pay period (the hours do not need to be compared on the SPAN).
  - If the individual is receiving services in a Community Based Care setting, the 512 must be touched. Verify the individual is now at the base rate or level 1 payment. No additional notice is required, though settings must be notified of any change in payment.
  - If the individual is receiving services in a nursing facility, the POC in MMIS must be updated. No additional notice is required.

## **Serving Individuals that are Approved for EWE**

CMs must complete a monthly direct contact for all consumers who have been approved for EWE. CMs should document the individual's progress towards implementing their transition plan in OA.

- The CM Services Due report will not display EWE eligible individuals as OA does not have an EWE benefit type. A spreadsheet was developed to assist LO's with tracking these cases.
  - The EWE Tracking Spreadsheet is located on the [EWE webpage](#).
- Each contact should be captured on the CM Service(s) tab and narrated in OA.

## **Review and Renewal Timeline and Process**

Eligibility must be reviewed every six months (the review month needs to be tracked manually). Ongoing eligibility is determined by the individual's progress on completing the identified steps outlined on the Extended Waiver Eligibility Planning Form. Ongoing eligibility is based upon the consumer's progress to transitioning off the program.

To complete the six-month review, the case manager will complete the second page of the EWE Planning Form (utilize the previously approved EWE Waiver Eligibility Planning Form for the first page). On the second page, for each identified risk, discuss the progress that has been made and add any additional identified steps that are now needed. Send in the request to [APD.EWE.Request@State.OR.US](mailto:APD.EWE.Request@State.OR.US), indicating in the subject line that it is a six-month review. The EWE policy analyst will review the completed form and information that is documented in Oregon ACCESS to make a determination. This includes reviewing for monthly direct contacts.

A Title XIX CA/PS assessment must be completed at least every 12 months.

## **Ending or closing EWE Services**

If the individual receiving EWE is successful in mitigating the identified risk(s) (i.e. the individual now has access to adequate and safe housing), the CM should complete a "Voluntary Agreement to Take Action" (form [457D](#)) if the individual agrees to no longer receive services.

However, if the individual wishes to continue receiving services, the CM must complete a reassessment, due to the change in care setting, and redetermine SPL and EWE eligibility.

## **Implementation/transition instructions:**

This transmittal and the EWE OARs should be reviewed and discussed at local CM meetings.

## **Training/communication plan:**

Several tools have been posted on the CM Tools EWE website page.

- NEW EWE Planning Form – (2/6/2019)

- [Mandatory EWE Webinar Q & A - 10/2017](#)
- [EWE Tracking Spreadsheet for local office use - 10/2017](#)
- [EWE Webinar - Audio Recording 10/4/17](#)
- [EWE Training Material - Power Point \(9/28/17 & 10/4/17\)](#)
- [ADRC OAA Services](#)
- [EWE Planning Form - 3/19](#)
- Mandatory CM Webinar on 3/6/19

**Local/branch action required:**

This transmittal and the EWE rules (OAR 411-015-0030) should be reviewed and discussed at local CM meetings.

**Central office action required:**

- Provide and initial receipt of request within five business days and a final decision within two business days of receiving all information.
- Update the SPAN form to reflect changes in policy.
- Technical assistance as needed.

**Field/stakeholder review:**  Yes  No

**If yes, reviewed by:** Policy and Operations

**Filing instructions:**

*If you have any questions about this policy, contact:*

Contact(s): Lindsay Vanderworker	
Phone: (503) 856-6931	Fax: (503) 947-4245
Email: APD.EWE.Request@State.OR.US	