

Policy Transmittal Aging and People with Disabilities



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Number: APD-PT-21-042

Issue date: 12/22/2021

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 checked="" 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 checked="" 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"/> Support Service Brokerage Directors | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> ODDS Children's Residential Services | |
| <input type="checkbox"/> Child Welfare Programs | |

Policy/rule title:	Elimination of Liability for In-Home and PACE Services		
Policy/rule number(s):	461-160-0610, 461-160-0620, 461-185-0050	Release number:	
Effective date:	January 1 st , 2022	Expiration date:	
References:			
Web address:			

Discussion/interpretation:

Effective January 1, 2022, APD is eliminating the liability requirement for individuals receiving either in-home services or PACE services in all service settings. This program change requires approval from Centers for Medicare and Medicaid Services (CMS), however final approval is anticipated.

This change is applicable in the following programs:

- Services authorized under OAR 411-030, which includes:
 - In-home services
 - Independent Choices Program (ICP). See [APD-AR-21-069](#).
 - Spousal Pay

- Individuals enrolled under the Employed Persons with Disabilities (EPD) program and receiving one of the above-named services.
 - Per [OAR 461-160-0800](#), the participant fee is determined by a sliding scale calculation or the liability calculation described in [OAR 461-160-0620](#), whichever is less. OAR 461-160-0800 will reflect a calculation of \$0 liability; therefore, the participant fee for EPD participants receiving one of the services described above will be \$0.

- PACE services authorized under [OAR 411-045](#) for all service settings:
 - PACE In-home
 - PACE Residential
 - PACE Nursing Facility

Consumers **not enrolled in PACE** (Program of All-inclusive Care for the Elderly) who reside in a Community-Based Care (CBC) care setting or nursing facility (NF) are still responsible for paying their monthly liability. All individuals in a CBC setting are still responsible for paying room and board each month to the CBC provider, including PACE participants.

This PT has the following categories to help staff find the information that is relevant to their work. However, staff are encouraged to review the entire transmittal.

- [One related information](#)
- [Case management information](#)
- [Payment process changes](#)
- [Resource information](#)
- [Communication letters](#)

ONE related information

- APD has requested changes to the ONE system to modify the maximum liability notices to individuals receiving services in a program listed above. Once these changes are implemented, the maximum liability notice for these individuals will show a maximum liability of \$0. Due to federal reporting requirements, the maximum liability will continue to be calculated in the background for ONE cases for the next two years.

- Until system modifications in ONE are complete, the Notice of Eligibility (NOE) will still include the maximum liability amount. However, individuals no longer required to pay a liability due to this change will not be billed. If questions are received, due to the liability amount shown in the NOE, let the individuals know that they don't have to pay a liability.
- If the individual is receiving SNAP, the liability may be included as a medical expense. Immediate action due to the liability ending is not necessary. When processing a renewal, a mid-certification review or a reported change to their medical expenses, please review for changes to the SNAP medical expenses.
- Workers should continue to collect medical deduction information in ONE during the Medicaid application and redetermination processes or anytime a consumer reports a medical deduction. This will ensure a proper liability calculation if the individual changes living situations (e.g., moves to a non-PACE CBF). There is no need to send the MED 064 notice since the medical expense will not be used.
- Individuals' cases in the above service categories who are listed as CBI in the post eligibility screens will be updated to remove the CBI designation when the system changes are implemented. There is no need to take action on the CBI deduction at this time.
- Individuals with I/DD in-home services who are eligible for EPD may have previously requested to have EPD overridden to LTCSERV. These individuals will be returned to the EPD program at renewal but may also request the EPD override be removed at any time.

Case management information

- Beginning January 1, 2022, individuals previously required to make a liability payment in the programs described above will no longer be required to do so.
- Some individuals may have previously chosen to reduce the services received to reduce their liability amount. This is generally noted by a review of the current service plan. Case managers should speak with individuals that have made this decision to determine if there is an interest in revising their service plan.
- In addition, beginning on January 1, 2022, if case managers are aware of individuals who lost services or were denied services in the past due to outstanding liability amounts or participant fees, or expressed the inability to contribute towards the cost of care, should be encouraged to re-apply for services.

- Important note for PACE participants in a CBC or NF setting: Participants are still responsible for paying room and board costs in a CBC setting. In addition, if participants disenroll from PACE for any reason and continue to reside in a CBC or NF setting, they will become responsible for paying any calculated liability cost to continue receiving services.

Payment process changes

- If a January 2022 liability payment is received, please do not receipt the payment. Physical checks sent to local offices should be voided and returned to the individual. Checks that are sent to the Central Office PO Box for processing will be refunded. An update is being made to prevent payments for in-home or PACE services to occur [online](#). However, if a payment is successfully made for January services, they will be refunded.
- Individuals should continue to make their current payments through the end of 2021. After January 1, 2022 and with implementation of this policy, past unpaid liability amounts and participant fees will not be pursued unless those past due amounts have been previously referred for overpayment or Estates Administration Unit (EAU).
- Local office staff do not need to act on individual liability segments for impacted consumers. OIS is ending all current liability segments with end date 12/31/2021 or greater on or before calendar date 12/25/2021 (CM End of Month). This will prevent bills for January 2022 from going out.

Resource information:

- Resource limits will still apply as described in [OAR 461-160-0015](#). Staff will need to discuss this requirement to individuals as appropriate. Refer to the [Excess Resources for OSIPM Talking Points QRG](#) for additional information.
 - AVS in ONE will be run by the eligibility worker when the individual is due for renewal or reports another change.
 - Issues with resources will be flagged for review – see [APD-IM-21-098](#)
 - For actions to take if the individual is over resources see [APD-IM-21-005](#)
- Individuals may choose to make payments for past assistance to reduce their available resources. Here is the process to receipt payments for past assistance:
 - Local offices receipt and deposit monies for repayment for past assistance. To do so send the yellow copy of the DHS 29 and the pink copy of the deposit slip to the following address:

*DHS Receipting
Customer Pay-in Technician
500 Summer St NE, E08
Salem, OR 97301*

- This unit will notify EAU of the payment. The “121 receipt” code is used when we receive money from an APD customer and
 - The money is paid to reduce a customer’s assets or retain eligibility; or
 - For other APD reimbursements for services not on the customer pay-in system.
- Complete the DHS 29 receipt.
 - In the Case # field, enter the client’s Prime #;
 - Be sure the description field includes the Case #. For example: Reimb Past Asst AA9999.
- Be sure to add exactly what the payment is in the Description/Reason for Payment box; non-specific payments of the first kind will be tracked by Estates Administration’s one-time payment system.
- Please note: There is no requirement for individuals to make payments for past services. Staff may provide this as an option for individuals to consider, however it is completely voluntary.

Communication letters:

Individuals that are no longer required to make a liability payment will receive a letter notifying them they are no longer responsible for making the payment beginning January 1, 2022. The letters are provided at the end of this transmittal.

Note that the letter directs consumers to contact their case manager or local office in three specific scenarios:

- If individuals previously chose to reduce the amount of services they receive, based on the amount of liability they could afford.
- They believe they received the letter in error.
- Appropriate resource spending.

Field/stakeholder review: Yes No

If yes, reviewed by: Operations and internal review

If you have any questions about this policy, contact:

Contact(s): APD.MedicaidPolicy@dhsosha.state.or.us	
Phone:	Fax:
Email:	

In Home Letter:

Dear (Name of Individual):

This letter notifies you that starting on January 1, 2022, you will no longer be required to make a monthly payment towards the cost of your care, based upon a policy change from Aging and People with Disabilities. This means you can now use the income you receive to meet your other needs.

If you currently do not make a payment or believe you have received this letter in error, please contact your case manager or local APD office as soon as possible.

It is important to note that a monthly payment may be required in the future if you decide to receive services in a different setting other than your home.

If your service plan hours were reduced due to the amount of pay-in or liability you could afford, please contact your case manager to discuss service planning options. You may be able to receive additional hours or supports.

Please be sure to make any required payments for the remainder of 2021.

Please keep in mind that there is still a limit on how much money you may keep and remain eligible for benefits and services. For most individuals, this means you may not have more than \$2000 available in resources such as funds in your bank account(s). If you have concerns about exceeding this limit, please contact your case manager.

Sincerely,

Aging and People with Disabilities

PACE Letter

Dear (Name of Individual):

This letter notifies you that starting on January 1, 2022, you will no longer be required to make a monthly payment towards the cost of your care, based upon a policy change from Aging and People with Disabilities. This means you can now use the income you receive to meet your other needs. Please note that if you live in a care setting, you will continue to pay the room and board portion each month.

If you currently do not make a monthly payment or believe you have received this letter in error, please contact your case manager or local APD office as soon as possible.

It is important to note that a monthly payment may be required in the future if you decide to receive services outside of PACE.

Please be sure to make any required payments for the remainder of 2021.

Please keep in mind that there is still a limit on how much money you may keep and remain eligible for benefits and services. For most individuals, this means you may not have more than \$2000 available in resources such as funds in your bank account(s). If you have concerns about exceeding this limit, please contact your case manager.

Sincerely,

Aging and People with Disabilities

ICP Letter:

Dear (First name):

As a recipient of the Independent Choices Program this letter is to notify you that starting January 1, 2022, you will no longer be required to make your pay-in towards your cost of care based on a policy change from Aging and People with Disabilities. This means you will be able to use the income you receive to meet your other needs and you will no longer need to put your pay-in money into your ICP checking account.

It is important to note that a pay-in amount may be required in the future if you decide to receive services in a different setting other than your home.

If your service plan hours have been reduced due to the amount of the pay-in you were able to afford, please contact your case manager to discuss service planning options. You may be able to receive additional hours.

Please be sure to deposit your pay-in into your ICP checking account through December 2021. If you currently do not make a monthly pay-in, or believe you have received this letter in error, please contact your case manager as soon as possible.

Please keep in mind that there is still a limit on how much money you may have and remain eligible for benefits and services. For most individuals, this means you may not have more than \$2,000 in resources such as funds in your bank account(s). If you have concerns about exceeding this limit, please contact your case manager.

Sincerely,

Aging and People with Disabilities