

Arizona Long Term Care (ALTCS)

An Overview



ALTCS Eligibility

Determined by the AHCCCS
Division of Member Services (DMS)

- Casa Grande
- Chinle
- Cottonwood
- Flagstaff
- Glendale
- Globe-Miami
- Kingman
- Lake Havasu City
- Mesa
- Phoenix South
- Prescott
- Show Low
- Sierra Vista
- Tucson
- Yuma



Eligibility Requirements

- ❖ Aged, blind or disabled
- ❖ U.S. Citizen or qualified non-citizen
- ❖ Arizona Residency
- ❖ Social Security Number
- ❖ ALTCS Living arrangement
- ❖ Income limit
- ❖ Resource limit
- ❖ Medically eligible

Living Arrangements

Appropriate ALTCS living arrangements include:

- ❖ Home
- ❖ Alternative Residential Settings
- ❖ Certain Medical Institutions



Alternative Residential Settings

- ❖ Assisted Living Facilities
- ❖ Alzheimer's Demonstration Project Facilities
- ❖ Behavioral Health Centers (Levels II & III)
- ❖ Centers for Traumatically Brain-Injured (TBI)
- ❖ Child Development Foster Homes
- ❖ Group Homes for the Developmentally Disabled
- ❖ Large Group Settings for Adults & Children
- ❖ Rural Substance Abuse Transitional Agency Centers



Medical Institutions

- ❖ Nursing Facilities
- ❖ ICF-MR
- ❖ Free-standing hospice
- ❖ Residential Treatment Center (RTC)
(for under age 21)
- ❖ Institutions for Mental Disease (IMD)
- ❖ Level I Behavior Health Centers

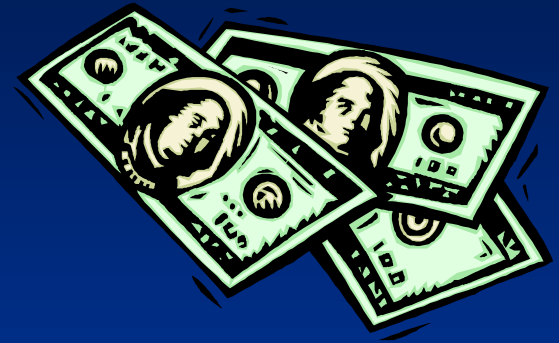


ALTCS Financial Limits

- ❖ Resource limit = \$2,000
- ❖ Income limit = 300% FBR
(January 2006 = \$1,809)



What if resources exceed \$2,000?



- ❖ Reduce resources
- ❖ Disabled Under 65 Trust

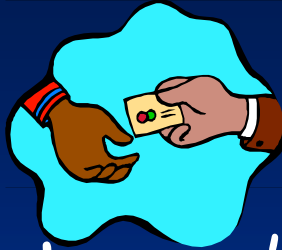
What if Income Exceeds \$1,809?

Special Treatment Income Only Trust

- ❖ Established when the customer is over the \$1,809 income limit but under the average private pay rate (\$4,507.06 for Maricopa County effective 10/1/05)
- ❖ Only income may be assigned/deposited to the trust



Share of Cost



- ❖ Based on the customer's income only
- ❖ The customer may be asked to pay a share of cost if:
 - The customer lives in a nursing facility for an entire month; or
 - The customer lives in the community, but has income that exceeds Share of Cost deductions (Income Only Trusts)

Share of Cost Deductions

- ❖ Personal Needs Allowance (PNA)
 - HCBS - \$1,809
 - Nursing Facility - \$90.45
- ❖ Health insurance premiums
- ❖ Non-covered medical expenses like eyeglasses & dentures



More SOC Deductions

- ❖ Spousal Allowance
- ❖ Family Allowance (for dependent children)
- ❖ Home maintenance allowance (\$210) if there is a plan for discharge from the nursing facility within 6 months of the admission date

Medical Eligibility

Only applicants who are determined to be at risk of institutionalization and require care equal to that provided in a Nursing Facility or Intermediate Care Facility for the Mentally Retarded (ICF-MR) are medically eligible for ALTCS services.



Medical Eligibility



- ❖ The Pre-Admission Screening (PAS) is used to determine medical eligibility
- ❖ The PAS is completed by a registered nurse or social worker from an ALTCS office

Elderly & Physically Disabled PAS

The EPD PAS instrument considers the customer's:

- ❖ Ability to perform activities of daily living
- ❖ Communication & sensory abilities
- ❖ Contenance
- ❖ Orientation
- ❖ Behavior
- ❖ Medical conditions
- ❖ Medications, treatments, diet
- ❖ Specific service needs



PAS Scoring

- ❖ The PAS is a statistically valid scoring tool
- ❖ Physician's Review is required for customers whose medical eligibility is questionable.



County of Fiscal Responsibility

If the customer lives:	Then the county of fiscal responsibility is:
In his or her own home	The county in which the customer resides
In an alternative residential setting or a long term care medical facility	The county in which the customer last resided in his or her own home



County of Fiscal Responsibility

- ❖ The county that is responsible for paying part of the state's funding match for the customer's ALTCS services.
- ❖ The county in which the customer physically resides and the county of fiscal responsibility may be the same county or different counties.



Enrollment Choice

Enrollment choice is available to elderly or physically disabled (EPD) customers whose county of fiscal responsibility is a choice county.



Who Can Make an Enrollment Choice?

- ❖ Customer's legal guardian
- ❖ Customer
- ❖ Customer's representative, family member, friend or anyone without a conflict of interest

A conflict of interest exists when an individual is employed by (or in some manner related to) a business or entity that may be financially impacted by the enrollment choice.



ALTCS Office Responsibilities

The ALTCS office:

- ❖ Provides enrollment choice information;
- ❖ Assists the customer in making an informed choice; and
- ❖ Makes a choice on behalf of the customer when the customer or representative is unable to make a decision, if the customer's living arrangement would be impacted by the choice.

.



Application Process Summary

- ❖ Initiate an application (phone, mail or walk-in)
- ❖ Financial Interview (phone or in person)
- ❖ Verification & Documentation
- ❖ Pre-Admission Screening (PAS)
- ❖ Program Contractor Choice (choice counties)
- ❖ Final Determination



What Happens After Approval?

- ❖ Written Notice to Customer
(Includes SOC amount)
- ❖ AHCCCS sends roster to Program Contractor (PC) and ID Card to customer
- ❖ Annual financial renewal and periodic medical reassessment completed by ALTCS office

Annual Enrollment Choice

Two Month Process

AHCCCS mails enrollment choice information to the member two months prior to the enrollment anniversary date.

❖ 1st Month = Customer's **Choice Month**

❖ 2nd Month = PCs' **Transition Month**



Enrollment Changes

Generally, once enrollment occurs, a member cannot change enrollment until his or her anniversary date.

Most enrollment changes within a choice county require the agreement of both the sending and receiving PCs.

