



Washington Apple Health (Medicaid) And Long-Term Services and Supports (LTSS) for Adults

Explore:

- The process for applying and receiving Apple Health LTSS.
- Care options for people receiving Apple Health LTSS.
- Caregiver assistance options.

A message from the Director of...

Home and Community Services

If you have received this booklet, then you (or your loved one) are looking at options for help with your care. This is uncharted territory for many people and it may feel unfamiliar and confusing. It can be difficult to know what help is available, how to access services and how you will pay for it.



Home and Community Services is part of state government. We help low-income seniors and adults with disabilities and their families get information, support and services when long-term care is needed.

We are proud that Washington state is recognized as a pioneer and national leader in helping all adults who need care to continue to live as independently as possible at home or in a community setting. In fact, the American Association of

Retired Persons (AARP) consistently ranks our programs as one of the best in the country.

What does this mean for you? You have many options and choices to get the care you need. You are not alone as you learn about what options are available, and as you set up services.

Our public benefits specialists and social services workers are professionals that will help you understand your options and match your needs and preferences to quality services available in your community.

I encourage you to read through this booklet and ask your public benefits specialist or social services worker any questions that come to mind. I know you are in capable, knowledgeable hands.

Sincerely,

Kristin Byrne

Interim Director, Home and Community Services

Washington Apple Health (Medicaid) And Long-Term Services and Supports (LTSS) for Adults

You Have a Choice.

This booklet is for adults age 18 or older who have a chronic condition, disease, or disability, need help with care and are exploring using Washington Apple Health Long-Term Services and Supports (LTSS) (also known as Medicaid) to help pay for care.

If you need assistance but are not exploring using Apple Health LTSS to help pay for your care, you may find it helpful to access information about long-term services and supports on our website: www.dshs.wa.gov/altsa/long-term-care-services-information.

This booklet will help you learn more about:

- How to apply for Apple Health LTSS.
- The income and resource eligibility limits for Apple Health LTSS.
- Estate recovery of any funds you receive.
- In-home and residential care service options and resources if you are eligible for Apple Health LTSS.
- Resources for your unpaid family caregiver.

Resources


Community Living Connections: 1-855-567-0252

ALTSA website: www.dshs.wa.gov/altsa

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■ Home and Community Services (HCS) is part of the Aging and Long-Term Support Administration (AL TSA), an administration within the Department of Social and Health Services (DSHS).

HCS staff provide a variety of services and support to you.

Applying for Apple Health LTSS

Apple Health LTSS is a government health insurance program that pays for long-term services and supports for people who have very limited income and resources.

If you are eligible, Apple Health LTSS pays for services in your own home, a community residential care facility (Adult Family Home or Assisted Living Facility) or nursing facility.

How to Apply

If you are age 18 or older, you can apply for Apple Health LTSS through your local Home and Community Services (HCS) office or online.

There are three main parts to the application process:

1. Filling out and turning in an application.
2. A financial review to determine your financial eligibility.
3. A personal care assessment to determine your functional eligibility.

Apply in person or by mail

Call or visit your local HCS office to get an application form. Phone numbers for HCS offices are on page 24 of this booklet. The application form can be:

- Mailed to you.
- Picked up at a local HCS office.
- Downloaded and printed at: www.hca.wa.gov/health-care-services-supports/forms-and-publications under 18-005 Washington Apple Health Application for aged, blind, disabled/long-term care coverage. To easily locate the document online, we recommend typing 18-005 into the search tool on the Health Care Authority (HCA) webpage. The document has instructions for how to submit your application.

Apply online

To fill out and submit the application online, go to Washington Connection at www.washingtonconnection.org/home/ and click “Apply Now.” This brings you to a secure internet page. Any information you enter on the application is protected.

If you are under age 65 and not on Medicare, apply for Apple Health LTSS through the Washington Health Benefit Exchange www.wahealthplanfinder.org and click “Apply Now” to apply for coverage and indicate a request for long-term services and supports.

Filling Out the Application

Follow the instructions and answer all the questions on the application. If you need help filling out the application, call your local HCS office. Phone numbers for HCS offices are on page 24 of this booklet and online at www.dshs.wa.gov/AL TSA/resources.

Information you will need to provide includes:

- Your Social Security number.
- Proof of identification.
- Proof of income.
- Authorization for electronic asset verification.
- Documentation of resources (such as bank statements, property tax statements, life insurance). Resources in financial institutions may be verified through the Asset Verification System (AVS).
- Immigration or alien documents.
- Proof of citizenship if you do not receive Medicare, Supplemental Security Income (SSI), or Social Security Benefits.

Additional Support during the application process

If you need assistance during the application process, ask a HCS staff person for help.

HCS staff may be able to offer you materials in Braille, translated, in large print, or the use of assisted listening devices, TTYs (Teletype Telephone), or a qualified/certified interpreter.

If you want someone else to apply for you, you need to sign a consent form giving the other person permission to represent you during the application process. The consent form must be updated annually.

Make sure the person you designate is prepared to answer questions about your personal and financial situation.

More information on the application process for long-term services and supports can be found at: www.hca.wa.gov/health-care-services-supports/program-administration/applications-ltss.

Financial Review

Once you have completed your application, a HCS public benefits specialist works with you to see if you are financially eligible to receive Apple Health LTSS. Depending on what works best for you, this can be an in-person or telephone interview.

Apple Health LTSS rules can be found at: www.hca.wa.gov/health-care-services-supports/program-administration/apple-health-eligibility-manual.

Washington Apple Health LTSS (Medicaid) rules can be found at: www.hca.wa.gov/health-care-services-supports/program-administration/apple-health-eligibility-manual.

When you talk to the public benefits specialist, you can explain in more detail the answers on your application.

You must declare all resources you have when applying for Apple Health LTSS. See the next section “Income and resource eligibility limits” for more information about the income and resource eligibility limits and any resource transfers the public benefits specialist will be reviewing with you.

HCS employees can explain Apple Health LTSS rules but are not able to give personal, financial, or legal advice. You may want to talk with an attorney who understands Apple Health rules if you need help with a decision.

Staff at your local Community Living Connections or Area Agency on Aging office can help you locate legal assistance. See page 21 for contact information.

Income and resource eligibility limits

You must meet various income and resource requirements to be eligible for Apple Health LTSS. Income and resource limits are set by law and change each year.

Income

Apple Health LTSS income limits vary depending on the services you need, your living situation, and your marital status. The HCS office will have current information. All Apple Health LTSS income and resource standards are found at www.hca.wa.gov/health-care-services-supports/program-standard-income-and-resources.

Resources

You must declare all resources you have when applying for Apple Health LTSS. Resources include money, assets, or property, such as cash, bank accounts, stocks and bonds, retirement plans, trusts, annuities, life insurance policies, sales contracts, vehicles, and land that is not part of your primary residence. If you are married, resources of both spouses are used to determine your eligibility for Apple Health LTSS.

Certain “exempt” resources are not counted toward the resource limits. Exempt resources can include your primary residence, household goods and personal effects, a car, life insurance with a face value not more than \$1,500, burial plots, and most prepaid burial plans.

You must declare all resources you have when applying for Apple Health LTSS.



■ Your CARE assessment helps determine if you are functionally eligible to receive Apple Health LTSS.

Transferring resources

Federal law states that certain gifts or transfers made to qualify for Apple Health LTSS are subject to penalties. State law also contains penalties for the person who receives resources transferred for less than fair market value.

Under state and federal law, the HCS public benefits specialist must review any transfer of resources that took place within 60 months of the date you apply for institutional or Home and Community Based Waiver services. These must be reported by the client but may also be found through the Asset Verification System.

If resources were transferred within that timeframe and you did not receive fair market value for them, you may not be eligible to receive Apple Health LTSS for a period of time.

Federal law states that certain gifts or transfers made to qualify for Apple Health LTSS are subject to penalties. State law also contains penalties for the person who receives resources transferred for less than fair market value.

You can transfer your home without penalty to your:

- Spouse.
- Sibling who has an equity interest in the home and has lived there for at least one year immediately before the date of Apple Health LTSS eligibility.
- Dependent child under 21 years of age.
- Child who is blind or disabled.
- Adult child who has lived with you and provided your care for at least two years in order for you to remain at home immediately before the date of Apple Health LTSS eligibility.

Personal Care Assessment

During your personal care assessment, also known as your Comprehensive Assessment Reporting & Evaluation (CARE) assessment, a social services worker comes to your home and talks with you at length. This interview allows the social services worker to understand and evaluate what is currently happening in your day-to-day life and what kind of help you need. You will be asked about what help you received to complete activities of daily living such as eating, dressing, bathing, ambulating and toileting.

This CARE assessment is used to determine if the level of care services you need makes you functionally eligible to receive Apple Health LTSS.

If you are eligible to receive Apple Health LTSS, the social services worker will review your options for care services with you, will help you develop an individualized care plan and coordinate setting up your services. See page 11 for a review of some of the service options that may be available to you. It is helpful to read this section before you meet with a social services worker.

As part of your CARE assessment, a nurse can be available to help assess and plan what kind of help you may need with skilled health care tasks. This may be a consultation between a nurse and your social services worker, or a phone call or home visit between you and the nurse.

Many people already have family and friends helping with care. For example, your nephew may take you grocery shopping or to the doctor, your daughter may help you pay bills, and a friend may pick you up each week for a religious event.

Talk with these family and friends and find out if they are going to, and are able to, continue to do these things for you before you meet with the social services worker.

You will receive a letter letting you know if you have been approved for Apple Health LTSS coverage.

What to Expect When Your Application is Approved

You will receive a letter letting you know if you have been approved for Apple Health LTSS coverage.

The letter will tell you how much of your income you may keep for your personal needs, spousal support, home maintenance allowance, medical insurance premiums, necessary medical expenses not covered by Apple Health LTSS, and how much you must pay your caregiver towards your cost of care (Client Responsibility). See the next section, **Your Income Once You Receive Apple Health LTSS**, for more information.

Contact the person who sent you the letter if you have any questions about what is in the approval letter.

You will receive a ProviderOne Services Card to access services like medical care. If you are not on Medicare, you will be enrolled in an Apple Health LTSS managed care plan; www.hca.wa.gov/health-care-services-supports/apple-health-medicaid-coverage/apple-health-managed-care. If you are on Medicare, most of your Medicare related co-payments will be covered. Once you are eligible for Apple Health LTSS, you are also enrolled into the Low-Income Subsidy Medicare D prescription drug plan if you don't have one. For more information on Medicare programs visit: www.hca.wa.gov/health-care-services-supports/program-administration/medicare-and-long-term-care.

You will receive a Health Care Coverage Rights and Responsibilities form (HCA 18-011) that outlines your rights and responsibilities when receiving Apple Health LTSS for aged, blind, disabled or are in need of long-term services and supports. A copy of the HCA 18-011 is available by typing 18-011 into the search tool at www.hca.wa.gov/health-care-services-supports/forms-and-publications.

Your financial and functional eligibility to receive Apple Health LTSS benefits will be reviewed at least once a year and after any significant changes in your condition.

If you are not approved

You will receive a letter letting you know your application has been denied for Apple Health LTSS coverage.

There are many low-cost resources and programs that you may want to explore. Contact your local Community Living Connections office. See page 21 for more information.

Your eligibility to receive Apple Health LTSS benefits will be reviewed at least once a year and after significant changes in your condition.

Your Income Once You Receive Apple Health LTSS

Once you begin receiving Apple Health LTSS, you may have to contribute some of your income towards the cost of your care. This is called Client Responsibility. Your Client Responsibility amount depends on the services you receive, your marital status, and your income. You must pay these Client Responsibility costs if they are required.

Part of your available income may go towards a spousal allowance. A spousal allowance is used to bring your spouse's income up to established federal government standards. Receiving a spousal allowance depends on the program you are eligible for, your needed services, and your living situation. Part of your available income may also go to support dependent relatives.

If you live at home, part of your available income can be kept for home maintenance such as rent, utilities, taxes, and personal needs. If you live in a residential care facility, you keep some of your income for your personal needs.



If you will be staying in a nursing facility a short time, you may be able to keep additional income to help maintain your home for your return. This is known as a “Housing Maintenance Allowance”. Your doctor must verify that you will likely return home within six months.

If you are residing in an Adult Family Home or Assisted Living Facility, you will be responsible to pay room and board in addition to your Client Responsibility. The combination of Client Responsibility and room and board is called your total responsibility.

Apple Health LTSS plus the amount you pay in Client Responsibility is payment in full for your care. Adult Family Homes (AFHs) or Assisted Living Facilities (ALFs) (see page 19) may only request additional money from you for items not covered in the Apple Health LTSS rate. Here is an example:

- You prefer a name brand personal care item rather than the generic brand the AFH or ALF buys. You would have to pay more for the name brand personal care item.

An AFH or ALF charging additional money for items not covered in the Apple Health LTSS (Medicaid) rate must give you a copy of their supplemental payment policy outlining additional charges. Supplemental payment policy requirements are outlined in Washington Administrative Code (WAC) [388-105-0050](#) and [388-105-0055](#).

Contact the Residential Care Services (RCS) Complaint Resolution Unit (CRU) at 1-800-562-6078 if after reviewing the supplemental payment policy you have concerns or complaints.

Resident Personal Funds Held by a Facility

If a residential care facility holds any personal funds of a resident who dies, the money must be given within 45 days to:

- The individual or probate jurisdiction administering the resident’s estate.

- or -

- The Office of Financial Recovery. This office may release funds to pay for burial costs.

Recovery of Funds from Your Estate

By law, Washington state may recover (be paid back) payments the state made for all Apple Health LTSS you received prior to your death. Payment is taken from your estate (assets you owned or had an interest in at the time of death). This is called Estate Recovery. Additional information on Estate Recovery, including the types of services that are

Supplemental payment policy requirements are outlined in Washington Administrative Code (WAC) [388-105-0050](#) and [388-105-0055](#).

Resident Personal Funds Held by a Facility

If a residential care facility holds any personal funds of a resident who dies, the money must be given within 45 days to:

- The individual or probate jurisdiction administering the resident’s estate.

- or -

- The Office of Financial Recovery. This office may release funds to pay for burial costs.



■ There are many services, programs, and resources available to help you continue to live at home.

subject to Estate Recovery, can be found at in DSHS 14-454 document, “Estate Recovery Repaying the State for Medical and Long-Term Services and Supports” at: www.dshs.wa.gov/office-of-the-secretary/forms?field_number_value=14-454&%3Btitle=&%3B=Apply or Estate Recovery for Medical Services Paid for by the State at www.washingtonlawhelp.org/resource/estate-recovery-for-medical-services-paid-for?ref=EhazT. You may also read the Revised Code of Washington (RCW) [chapter 41.05A](#) and [chapter 43.20B](#) and Washington Administrative Code (WAC) [chapter 182-527](#).

Washington state will recover the cost of federally or state funded long-term services and supports with the exception of:

- Adult Protective Services (APS)
- Supplemental security payments authorized by the Developmental Disabilities Administration (DDA)

- Offender reentry community safety program services
- Volunteer services
- Medicare related co-payments and premiums under a federal Medicare Savings Program
- Medical costs the Health Care Authority pays if you do not also receive long-term care services and supports
- Medicaid Alternative Care (MAC) services
- Tailored Supports for Older Adults (TSOA) services

Estate Recovery only applies to assets you owned or had an interest in at the time of death. The state will not begin recovery efforts: until after your death; during the life of a surviving spouse; or while a surviving child is under age 21, blind, or disabled. Hardship provisions to protect dependent heirs or state-registered domestic partner may apply.

Certain lands belonging to American Indians or Alaska Natives may be exempt from Estate Recovery.

Various exemptions have existed over the years. DSHS will apply whatever Estate Recovery law existed on the date that benefits were received.

Liens Against Property

DSHS may file a lien or make a claim against any property to repay the costs of long-term care and medical services received if:

- You are permanently living in a nursing home or other medical facility.
- The property is part of your estate and you have died.

Before filing a lien against real property as part of Estate Recovery, DSHS will give notice and an opportunity for a hearing to your estate's personal representative or any other established titled owner of the property.

If you are permanently living in a nursing home or other medical facility and receive Apple Health LTSS, DSHS may recover costs from your estate or the sale of your property. If you return home, the lien is released. A lien is not filed against your home if your:

- Spouse; domestic partner; or a minor, blind, or disabled child lives in the home.
- Sibling has an equity interest in the home, currently lives there, and has lived there for at least one year immediately before you moved to the facility.

For more information on Estate Recovery, consult an attorney with experience in Apple Health LTSS law. You can also contact

Coordinated Legal Education, Advice, and Referral (CLEAR) toll-free at 1-888-201-1014.

CLEAR is a project of the Northwest Justice Project (NJP) – a non-profit statewide organization that provides free civil legal services to low-income Washington State residents. They have a website in English, Spanish, Chinese, Korean, Tagalog, Vietnamese, Russian and Somali at www.nwjustice.org.

Service Options for People Receiving Apple Health LTSS

There are many services, programs, and resources available to help you continue to live at home.

A social services worker, sometimes referred to as a case manager, will review your service options with you after your CARE assessment (see page 5).

The following pages are a summary of some of the service options you may discuss. Your social services worker will have more information and answer any questions you may have about the service options you may be eligible for, and talk with you about what you think will work best for you.

Services and Programs That Help You Stay at Home

Many people can continue to live at home if they have help with things like preparing meals, personal care, transportation, or housekeeping.

There are many services, programs, and resources available to help you in these areas.

Often, family and friends are already helping you and will continue to do so. Your social services worker will work with you and develop a care plan to fill in gaps where more help is needed.

Medicaid Alternative Care (MAC)

If you are 55 years or older, financially eligible for Apple Health LTSS medical services, have an unpaid family (or friend) caregiver helping you with some personal care tasks, and you want to live at home, Medicaid Alternative Care (MAC) is a choice for you. MAC is an Apple Health LTSS provided through the Medicaid Transformation Demonstration waiver that will support your unpaid caregiver with services and supports to help them be successful in their caregiving role. MAC services would be provided instead of the other Apple Health LTSS listed in this booklet.

Services provided under MAC are not subject to Estate Recovery and Client Responsibility (co-pay) as described on pages 6-10 in this booklet.

MAC provides a wide range of service choices for caregivers within program limits:

- Information about caregiving, resources in your community, available services and more.
- Evidence-based consultation.
- Support groups and counseling.
- Durable Medical Equipment.
- Potential for respite care options or housework and errand support.
- Training opportunities.

For more information about the MAC program, ask your social services worker, contact your local Community Living Connections office at www.waclc.org/consite/index.php or visit www.dshs.wa.gov/altsa/stakeholders/medicaid-transformation-demonstration.

Help with Personal Care

Needing help with personal care means you need assistance with things such as bathing, dressing, or toileting. Programs such as Community First Choice (CFC) or Medicaid Personal Care (MPC) pay for personal care services.

You can hire a caregiver to help you with personal care if you meet the eligibility requirements. Depending on your income, DSHS will pay for all or part of these caregiver services (see page 6 for more information).

It is your choice who your caregiver(s) will be.



There are several in-home care options available if you need help with personal care.

DSHS also pays for basic caregiver training for any qualified caregiver(s) you hire.

It is your choice who your caregiver(s) will be. You can find a caregiver yourself or through the Consumer Direct Care Network Washington (CDWA), called an Individual Provider (IP), find one through a home care agency, or a combination of both. If you want a family member to be your caregiver, they can only be hired as an IP, or as a home care agency worker when the client is an enrolled member of a federally recognized Indian Tribe or resides in the household of an enrolled member ([RCW 74.39A.326\(1\)\(b\)](#)). IPs must meet certain state and federal criteria and the CDWA will help you determine if your family member or friend can be qualified to become an IP.

Individual Provider (IP)

With an IP, you decide who comes to your house and provides your personal care. You set your caregiver's work schedule within their work week limit (usually 40 hours per week) and determine how and when the tasks will be done. The number of hours you may use to hire a caregiver is determined through your CARE assessment.

You are the IP's managing employer. This means you choose, hire, and supervise the caregiver. You may also want to find a backup caregiver when your regular IP has time off. To find an IP, you can:

- Choose a friend or family member (with some exceptions).
- Use the Consumer Direct Care Network Washington (see page 14).
- Use Carina (see page 14).
- Look for someone in your community.

The CDWA will do a background check through DSHS on anyone you select.

Home Care Agencies

Your other option is to choose a licensed and contracted home care agency to provide a home care worker. A home care agency recruits, does background checks through DSHS, hires, supervises their workers, and makes sure home care workers receive the required training. A home care agency provides you with a backup home care worker if your scheduled home care worker is not available.

The home care agency supervisor will work with you to find home care workers that best meet your needs. However, you have less control over who is chosen in comparison to hiring an IP and you may not have the same home care worker coming into your home each time. With few exceptions, home care agencies are not allowed to hire one of your family members to provide your care.

Support for your Unpaid Family Caregiver

Another choice for services is to support your primary unpaid caregiver (like your spouse or adult children). Medicaid Alternative Care (MAC) and Tailored Supports for Older Adults (TSOA) are available instead of receiving personal care through Community First Choice (CFC) or Medicaid Personal Care (MPC) if you are 55 years or older. Your unpaid caregiver could be eligible for training and education, specialized equipment/supplies, health maintenance supports, and respite care. Estate Recovery and Client Responsibility do not apply to either MAC or TSOA programs. Your local HCS office will also be able to provide additional information on these programs.

Finding an Individual Provider

All Individual Providers (IPs) in Washington State are employees of the Consumer Direct Care Network Washington (CDWA). If you need assistance in your search for an IP or have any questions, please call CDWA at 1-866-214-9899 or visit their website at www.consumerdirectwa.com.

A free, web-based matching system called Carina is an online tool designed to help care receivers and IPs to find each other. To visit the site, go to <https://carina.org/HomeCare-Options>. If you have any difficulty, you can call Carina at 1-855-796-0605. Consumer Direct Care Network Washington (CDWA) can also help you post a “job” on Carina to tell potential IPs what you need.

Help with Health Care Needs

In the past, many people moved to a nursing home if care was needed from a licensed health care professional such as a registered nurse. Today, there are several in-home care options that may be available if you need help with health care tasks.

Self-Directed Care

If you live in your home, you can direct and supervise an IP to help you with health care tasks that you can't do because of your disability. This would include things an IP would not usually be able to do including administering medications, bowel programs, bladder catheterization, and wound care.

Nurse Delegation

In this program, a registered nurse (RN) evaluates your health care needs, and trains and supervises a nursing assistant or certified home care aide to provide health care tasks that you can't do for yourself. There are rules about what types of care can and cannot be delegated.

The nursing assistant or certified home care aide must receive training and be approved by the delegating nurse before doing any delegated tasks. Nurse delegation is available in your home or a residential care facility.

Home Health Agency

A home health agency provides skilled nursing care or a home health aide. Your doctor will make a referral to the home health agency.

Hospice

Hospice care involves a team of professionals and volunteers who provide medical, psychological, and spiritual care for people near the end of life and their families. Hospice care is most often provided at home but is also available in other care settings, including a hospital. Your doctor will make a referral for hospice care.

Health Home

The Health Home program promotes person-centered health action planning to empower clients to take charge of their own health care. This is accomplished through better coordination between the client and all of their health care providers.

Health Home services are a set of optional Medicaid benefits available to certain eligible clients. Participation is voluntary, at no cost to clients, and does not change or duplicate services currently being delivered. A Care Coordinator (CC) steps in when a service is needed and is not already being provided, to bridge gaps in care. The Health Home program is designed to:

- Ensure cross systems coordination and care transition;
- Increase confidence and skills for self-management of health goals; and
- Create a single point of contact responsible for bridging all systems of care.

Other Services That Can Help

The following are additional services that may be available based on your needs.

Adult Day Services

Adult day services are programs offering services in a group setting outside the home. Adult Day Care programs include help with personal care, social and therapeutic activities, education, routine health monitoring, a nutritious meal and snacks, coordination of transportation, first aid, and emergency care.

Adult Day Health programs provide all of these services plus nursing and rehabilitative therapies.

Assistive Technology

Adaptive devices or assistive equipment that increase your independence or substitute for human assistance, specifically with personal care, household, or health related tasks.

Environmental Modifications

Modifications, such as ramps, a grab-bar in the shower or near a toilet, or widening doorways for a wheelchair, may be added to your home to help you adapt to your changing needs safely.

Supportive Housing

For eligible individuals that are homeless, in institutions or have had difficulty in maintaining stable housing, Supportive Housing provides person-centered services to help obtain and maintain housing. This includes support to help search for and secure/establish independent housing and ongoing assistance to maintain tenancy.

Supported Employment

Supported Employment services help individuals find and maintain competitive employment in their community. Services include assistance with identifying potential jobs and employers, benefits counseling, support through the hiring process and job coaching.

Home Delivered Meals

A daily nutritious meal is delivered to your home.

Individualized Training

Training is provided if you or your caregiver(s) need further information/skills to effectively carry out your care plan or assist you in managing behaviors.

Specialized Medical Equipment and Supplies

Medical equipment and supplies necessary for you to live independently that is not covered by Medicaid, Medicare, or other insurance.

Personal Emergency Response System (PERS)

An electronic device is provided that allows you to get help in an emergency. The system is connected to your phone or you may also wear a portable “help” button. When activated, staff at a response center will call 911 and/or take whatever action has been set-up ahead of time.

Transportation

Limited transportation is provided to help you get to needed services and activities.

Skills Acquisition Training

Training provided to you to become more independent with your personal care.

Caregiver Management Training

Resources to help you learn how to hire, dismiss, and manage your personal care providers.



Additional Programs

The following programs are limited to certain geographic areas throughout the state. Talk with your social services worker to learn more about these programs.

New Freedom Consumer Directed Services

New Freedom offers you the opportunity for increased responsibility, choice and control over your services and supports. It is a participant-directed option. With New Freedom, you receive a monthly budget to purchase services and items to help you live as independently as possible.

A consultant knowledgeable about local service options works with you to purchase the services you want. A financial management service pays your service providers and helps you monitor your budget.

New Freedom is currently available in King and Pierce Counties for people who live at home.

Program of All-Inclusive Care for the Elderly (PACE)

PACE provides an integrated, multidisciplinary, team approach to health care and social services for adults 55 and older at a local PACE center. Tailored to meet your individual needs, the PACE center is the focal point for coordinating and providing most services.

PACE is currently available in specific zip codes in King, Spokane, Pierce and Snohomish Counties. To learn more about the PACE program, call Providence ElderPlace (King, Spokane and Snohomish Counties) at 206-320-5325, International Community Health Services (King County only) at 206-462-7100, and PNW PACE Partners (King and Pierce Counties) at 253-459-7270.

Residential Housing and Care Options

There are many options where you can live and get care if you choose. Most people are familiar with nursing homes. People are not as familiar with other live-in care options.

Assisted living is often used to describe any live-in care facility that provides housing, basic services and assumes general responsibility for the safety and well-being of residents.

The following is some helpful information about possible residential care housing options for people receiving Apple Health LTSS. The facility must be licensed by Washington State and accept Apple Health LTSS payment for residents.

There are many options where you can live and get care if you can no longer stay at home.

Adult Family Homes and Assisted Living Facilities

An Adult Family Home (AFH) is licensed to provide housing and care services for up to eight people in a house. AFHs provide both private and shared rooms with a community living space. The AFH may be run by a family with children, a single person, a married couple, friends, or business partners. The AFH may also hire other employees. Some AFHs allow pets. In some homes, multiple languages may be spoken.

An Assisted Living Facility (ALF) is licensed to provide housing and care for seven or more people in a home or facility. Housing options range from shared rooms to your own apartment-like unit, all with access to shared living spaces. ALFs vary in size and ownership from a family operated 7-bed facility to a 150-bed facility operated by a large national corporation.

All AFHs and ALFs provide housing and meals (room and board), varying levels of help with personal care, and assume general responsibility for your safety and care. What additional services are offered is different for each home and may include:

- Intermittent nursing care (a nurse available on a part-time basis).
- Assistance with or administering of medications.
- Specialized care to people living with developmental disabilities, dementia, or mental illness.

Your social services worker will have a listing and knowledge of what homes are available in your local area. A listing of all licensed housing options can also be found on the internet at www.dshs.wa.gov/altsa/long-term-care-services-information.

Choosing Care in an Adult Family Home or Assisted Living Facility (DSHS 22-707) is a free booklet from DSHS that talks about how to find and choose the right home for you. The booklet includes a checklist of things to ask and look for that can help you make your decision. Read it on the internet at www.dshs.wa.gov/SESA/publications-library, by typing 22-707 into the search tool.

Nursing Facilities

Nursing facilities provide 24-hour, supervised nursing care, personal care, therapy, nutrition management, organized activities, social services, room, board, and laundry services.

If you or your loved one will be admitting to a nursing facility, you may find it helpful to compare several different nursing facilities prior to admission. You can compare Medicare and Medicaid certified nursing

homes at www.medicare.gov/nursinghomecompare/search.html. Ratings are based on health inspections, quality measures and staffing ratings.

Entering a nursing home no longer means every person stays forever. People also go to a nursing home for rehabilitation or for short-term, intensive nursing care. Often people get better or decide they want to return home and get services there, or move to another home and community based setting.

Returning Home after a Stay in a Nursing Facility or Hospital

If you currently live in a nursing facility or have been in the hospital, there may be several services and supports available to help you return home or to choose other housing options where you can get the care you need. A nursing facility case manager from your local HCS office, in coordination with your nursing facility social services staff, will help you review your care and housing options and work with you to develop a discharge plan.

In addition, your nursing facility case manager can help identify transition services that may be available to you. Examples of these services may include help:

- Exploring your housing options and finding a place to live.
- Creating an individualized discharge and care plan.
- Paying some of your home expenses while you are in a nursing facility (for up to six months).
- Paying for a security deposit or getting utilities turned on.
- Modifying your home when necessary to make it safer, such as adding a ramp or bathroom grab bars.
- Getting settled again in the community.

Contact your nursing facility case manager or local HCS office for more information (see page 24 of this booklet for phone numbers).

You Have a Choice...

This booklet has given you information on applying for Medicaid and your options for care if you are eligible to receive it.

There are many people, options, and resources available to help you stay as independent as possible.

Participating in home and community services is voluntary. You have the right to decline or stop services at any time.

With support, you may not need to stay in a nursing facility.

Once you start receiving services, always contact your social services worker if you have questions or your care needs change.

With support, you may not need to stay in a nursing facility.

Community Living Connections (CLC)

Community Living Connections (CLC) is a trusted, publicly funded network of organizations and programs, named in a variety of ways, such as Aging & Disability Resources, Senior Information & Assistance, or Community Living Connections. Most of them are part of the local Area Agency on Aging (AAA). Staff will help you learn about and consider:

- What kind of long-term services and supports best suit your preferences and circumstances?
- What are the different ways to pay for those services?
- What is available in your area?

If you are not sure Apple Health LTSS is for you, you can talk with someone at your local CLC about alternatives to Apple Health/Medicare, and other available options in your area. A CLC worker will use person-centered conversation to help you better define for yourself, what is important to you, what is important for your well-being, and what long-term services and supports might help you achieve your goals while maintaining choice and control over your life.

CLC staff can provide assistance to access wanted programs and services, including those funded by Medicaid, Older Americans Act, the Veterans Health Administration, and other federal, state and local agencies, as well as how to private pay wisely for what you may need.

Visit Washington’s Community Living Connections website, www.waclc.org. You’ll find many helpful resources available there or you can click on “Connect”, then click on your county for contact information. Or you can call 1-855-567-0252 to talk with someone about what services and resources are available where you live.

Tailored Supports for Older Adults (TSOA)

Tailored Supports for Older Adults (TSOA) is an Apple Health LTSS provided through the Medicaid Transformation Demonstration waiver. It supports unpaid family caregivers who provide care to someone who is age 55 or older. It can also provide limited support to people without an unpaid family caregiver. The one receiving care (care receiver) must need some assistance with activities of daily living as determined in a brief assessment/screening.

TSOA is for care receivers who have higher financial resources than are typically allowed on Apple Health LTSS; around \$53,000 for a single person and twice that for a married person.

Services provided under TSOA are not subject to Estate Recovery and Client Responsibility (co-pay) as described on pages 6-10 in this booklet.

TSOA for Individuals with an Unpaid Caregiver

TSOA provides a wide range of service choices for caregivers within program limits:

- Information about caregiving, resources in your community, available services and more.
- Evidence-based consultation.
- Support groups and counseling.
- Durable Medical Equipment.
- Potential for respite care options or housework and errand support.
- Training opportunities.

TSOA for Individuals without an Unpaid Caregiver

Service choices available through TSOA to individuals without an unpaid caregiver include:

- Personal Care.
- Durable Medical Equipment.
- Personal Emergency Response System (PERS).
- Training opportunities.
- Adult Day Health.
- Information about resources in your community, available services and more.

Contact your local CLC office at www.waclc.org, call toll free 1-855-567-0252 to be connected to your local CLC office or visit www.dshs.wa.gov/altsa/stakeholders/medicaid-transformation-demonstration for more information about this program.

Additional Resources for Unpaid Caregivers

There are several resources to help support family and friends providing unpaid care.

Family Caregiver Support Program (FCSP)

The Family Caregiver Support Program helps support unpaid caregivers of adults 18 and older who are either not eligible for or not interested in Apple Health LTSS. You do not have to be applying for or

receive Apple Health LTSS to take advantage of these resources. Staff can help you:

- Find local resources/services.
- Find caregiver support groups and counseling.
- Get training on specific caregiving topics or caregiver supplies/equipment.
- Learn if there are options for respite care if you are an unpaid caregiver and need a break.
- Talk through specific issues you are having and offer practical information and caregiving suggestions.

Contact your local CLC office at www.waclc.org or call toll free at 1-855-567-0252. For more information on this program, visit www.dshs.wa.gov/altsa/home-and-community-services/caregiver-resources. Certain eligibility requirements may apply and services vary from community to community.

The Family Caregiver Handbook (DSHS 22-277) is a free booklet that can help you learn more about all aspects of providing care. See below for ordering information or read it online at www.dshs.wa.gov/sites/default/files/publications/documents/22-277.pdf.

Additional Information

Ordering Publications

You may order this booklet and other DSHS publications through the Washington State Department of Enterprise Services (DES) – Printing and Imaging. Go to their website at: <https://prtonline.myprintdesk.net/DSF/storefront.aspx?6xni2of2cF1OAY5jHVvIUrUsqozrCjF3xgL/DdBBf+Sre9e470j4aMR+LcLIWmKS>.

Publication requests may also be placed by:

Email at: printing@des.wa.gov

Phone at: 360-664-4343

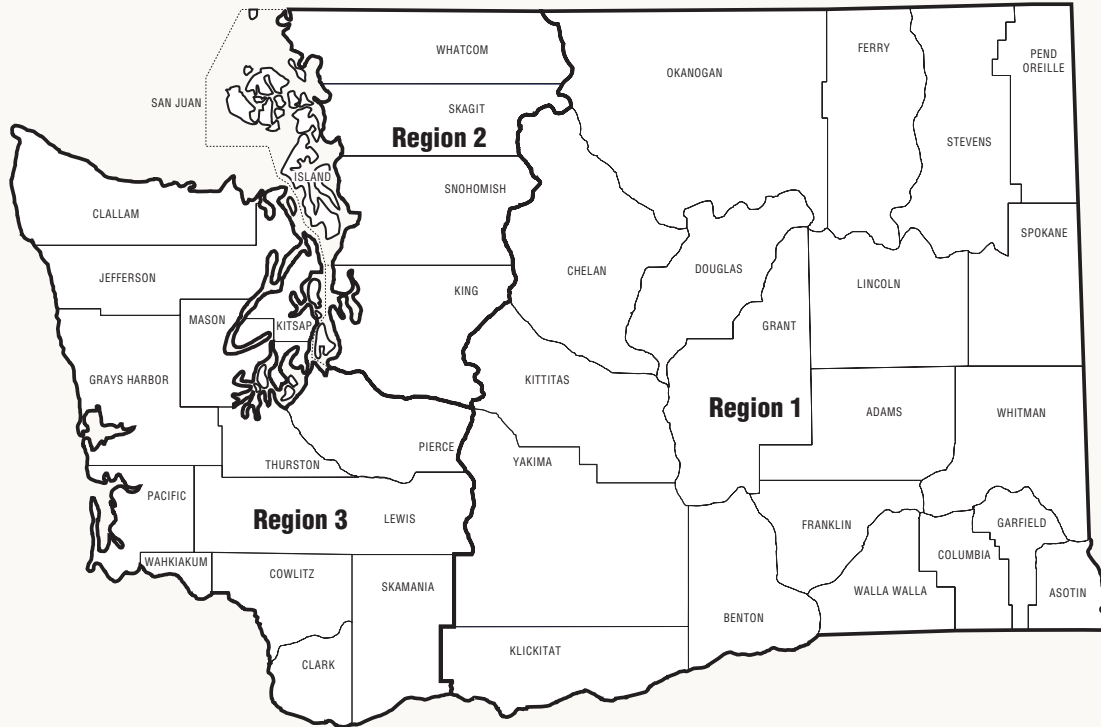
Make sure to include the name of the publication, publication number, and a contact name and street mailing address.

All publications, including translated versions, listed in this booklet and more can be found and read on-line at www.dshs.wa.gov/office-of-the-secretary/forms or www.hca.wa.gov/apple-health-client-forms.

DSHS does not discriminate in serving or contracting with people because of race, color, national origin, gender, sexual orientation, age, religion, creed, marital status, disability, or Veteran status, or the presence of any physical, mental, or sensory handicap.

Home and Community Services Regional Phone Numbers

See map to find the region you live in. Call the number listed for your region and ask for the local HCS office nearest you.



REGION 1

509-568-3700
1-800-459-0421
TTY 509-329-3698

Adams, Asotin, Benton, Chelan, Columbia, Douglas, Ferry, Franklin, Garfield, Grant, Kittitas, Klickitat, Lincoln, Okanogan, Pend Oreille, Spokane, Stevens, Walla Walla, Whitman, and Yakima Counties

REGION 2

206-341-7600
1-800-346-9257
TTY 1-800-833-6384

Island, King, San Juan, Skagit, Snohomish, and Whatcom Counties

REGION 3

253-476-7200
1-800-442-5129
TTY 253-593-5471

Clallam, Clark, Cowlitz, Grays Harbor, Jefferson, Kitsap, Lewis, Mason, Pacific, Pierce, Skamania, Thurston, and Wahkiakum Counties

Adult Protective Services (APS)

We are all partners against adult abuse

Abuse of vulnerable adults (people who need help to care for themselves) can happen anytime, anywhere. DSHS investigates alleged abuse, neglect, exploitation, or abandonment of vulnerable adults.

If you suspect abuse, neglect, or exploitation of a vulnerable adult:

Call DSHS toll-free 1-866-363-4276





Transforming lives
