

HCBS PROGRAM COMPARISON – AS OF JANUARY 2022 – People Aged 65 and Older

PROGRAM FEATURE	ESSENTIAL COMMUNITY SUPPORTS (ECS)	ALTERNATIVE CARE (AC)	ELDERLY WAIVER (EW)
<p>Financial Eligibility</p> <p>Financial information here is subject to change.</p>	<p>Income and asset rules follow AC eligibility guidelines.</p> <p>No MA-verified asset and income assessment is required for married couples, but applicants may be required to verify should they apply for AC or MA in future.</p> <p>Assessor determines financial eligibility.</p> <p>Lead agencies use forms DHS-6683 and DHS-6683A, calculating worksheets, to determine financial eligibility.</p> <p>Applicants complete form DHS-6826, Financial Disclosure Form, to assist in determining income and asset information.</p> <p>See Minnesota Statutes, section 256B.0922</p>	<p>The AC financial eligibility threshold is equal to eligibility for Medical Assistance (MA) within 135 days of entering a nursing facility (Max \$41,320 total income and assets).</p> <p>Sliding fee assessed for 0% to 30% of service plan (including case management) based on income and assets.</p> <p>A married couple must have an asset and income assessment completed and verified by a financial worker. Maximum community spouse asset allocation allowed (CSAA) = \$137,400.</p> <p>Assessors or AC case managers use forms DHS-2630 and DHS-2630A to determine financial eligibility.</p> <p>If a client has a financial change that could affect their case, they are required to report the change within 10 days using the DHS-3548, AC disclosure form.</p> <p>See Minnesota Statutes, section 256B.0913</p>	<p>Must enroll in Medical Assistance (MA) and be eligible for Long Term Care under MA</p> <p>Must meet MA asset limits (\$3000 individual, \$6000 couple)</p> <p>Monthly income \$0-\$2523, qualifies for SIS EW; no medical spenddown, may have waiver obligation.</p> <p>If EW participants have monthly income greater than \$2523, they are not eligible for the SIS-EW standard. Their standard would be the same as a non-waiver MA client and would have a spenddown, not a waiver obligation. These EW participants must spend down to \$870 each month.</p> <p>Special rules for financial eligibility for people with institutional level of care allow for income and/or asset allocation between spouses.</p> <p>Monthly Maintenance Needs Allowance = \$1059</p> <p>See Minnesota Statutes, section 256S</p>

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<p>Other Requirements</p>	<ul style="list-style-type: none"> • Assessed need for an ECS service • Coordinated services and support plan/Community support plan • Citizen, U.S. National, or qualified non-citizen • Case management required • No other payor (LTC insurance, e.g.) • No LTC penalty in place • No client contribution 	<ul style="list-style-type: none"> • Assessed need for an AC service • Community support plan • Citizen, U.S. National, or qualified non-citizen • Case management required • For some, sliding fee, client contribution • No other payor (LTC insurance, e.g.) • No LTC penalty in place • Estate Claim 	<ul style="list-style-type: none"> • Assessed need for EW service • Community support plan • Citizen, U.S. National, or qualified non-citizen • Case management required • For some, medical spenddown or waiver obligation client contribution • No other payor (LTC insurance, e.g.) • No LTC penalty in place • Estate Claim
<p>Enrollment Process</p> <p>Contact the county of residence for assessment</p> <p>Covid rules may affect face-to-face assessment requirements. See bulletin #20-56-10 LTSS policy amendments related to COVID-19 peacetime emergency</p>	<p>LTCC/MnCHOICES assessor:</p> <ul style="list-style-type: none"> • Meets face-to-face to assess needs • Determines the person DOES NOT meet NF Level of Care (<u>cannot</u> have NF LOC for ECS) • Determines need for ECS service in support plan • Determines financial eligibility <p>All participants are FFS. Lead agency will be county of residence or tribal nation.</p>	<p>LTCC/MnCHOICES assessor:</p> <ul style="list-style-type: none"> • Meets face-to-face to assess needs • Determines the person DOES meet NF LOC • Determines need for AC service in support plan • Determines financial eligibility <p>All participants are FFS. Lead agency will be county of residence or tribal nation.</p>	<p>LTCC/MnCHOICES assessor:</p> <ul style="list-style-type: none"> • Meets face-to-face to assess needs • Determines the person DOES meet NF LOC • Determines need for EW service in support plan <p>County financial worker determines MA financial eligibility.</p> <p>Lead agency will be county of residence, tribal nation, or a managed care organization.</p> <p>Over 90% of EW participants are in managed care (Minnesota Senior Health Options(MSHO) or Minnesota Senior Care + (MSC+)</p> <p>Counties and tribes may be a delegate of an MCO in their area and provide assessment, care coordination and case management to MSHO and/or MSC+ enrollees on EW.</p>

Services

For HCBS service descriptions, please see [Community Based Services Manual \(CBSM\)](#)

Services are subject to change

All services require prior authorization

For ECS, AC, and FFS-EW, MMIS service agreements are completed.

Managed care organizations (MCOs) use internal prior authorization and provider billing systems.

Lead agencies use state rates except for residential services. For residential services, a DHS rate-setting tool sets an individualized rate for each participant, up to service rate limits.

Lead agencies authorize Environmental Accessibility Adaptions (home modifications) under a maximum budget amount.

- Adult Day Service
- Personal Emergency Response System (PERS)
- Chore
- Family Caregiver Coaching/Counseling
- Family Caregiver Education/Training
- Home Delivered Meals
- Case Management
- Case Management Aide
- Community Living Assistance (CLA)
- Homemaker

Does not include health care coverage for acute, primary, preventive care.

- Adult Day Service/ADS Bath/FADS
- Case Management, Case Aide & Conversion Case Management (during NF admission)
- Chore Services
- Companion Services**
- Family Caregiver Coaching/Counseling**
- Family Caregiver Education/Training**
- Family Caregiver Memory Care**
- Home Delivered Meals
- Home Health Aide
- Homemaker Services – Assistance with personal cares, Cleaning, Home Management**
- Individual Community Living Supports (ICLS)**
- PDN, LPN, Home Health
- Environmental Accessibility Adaptations
- Consumer Directed Community Supports (CDCS)
- Personal Care Assistant (PCA)
- Personal Emergency Response System (PERS)
- Respite Care – Out of Home
- Respite Care – In Home**
- Home Care Nursing, RN, Home Health
- Specialized Equipment and Supplies
- AC Transportation
- Nutrition Services
- Discretionary Services
- RN, Supervision of PCA

** Indicates permanent remote service

Does not include health care coverage for acute, primary, preventive care.

- Adult Day Service/ADS Bath/FADS
- *Customized Living (aka Assisted Living)
- *24-hour Customized Living
- *Adult Foster Care – Corp and Family
- Family Caregiver Coaching/Counseling**
- Family Caregiver Education/Training**
- Family Caregiver Memory Care**
- Case Management & Case Aide
- Chore Services
- Companion Services**
- Home Delivered Meals
- Home Health Aide, Extended
- Homemaker Services – Assistance with personal cares, Cleaning, Home Management**
- Individual Community Living Supports (ICLS)**
- PDN, LPN, Extended Home Health
- Environmental Accessibility Adaptations
- Consumer Directed Community Supports (CDCS)
- Personal Care Assistant (PCA), Extended
- Personal Emergency Response System (PERS)
- Respite Care – Out of Home
- Respite Care – In home**
- Home Care Nursing, RN, Extended Home Health
- Specialized Equipment and Supplies
- Waiver Transportation
- Transitional Supports**

** Indicates permanent remote service

MA Includes coverage for acute, primary, preventive health care services as well as services listed above under EW.

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<p>Spending Limits</p> <p>Budget limits are subject to change</p> <p>For more information, please see DHS-3945 Long-Term Services and Supports Service Rate Limits</p>	<ul style="list-style-type: none"> • \$466 monthly budget • Case management/service coordination is limited to \$600 annually 	<p>Case mix classification is based on dependencies in activities of daily living (bathing, dressing, etc.), behavioral/cognitive needs, and need for clinical monitoring of medical treatments.</p> <p>The monthly cost of AC services is limited to 75% of the monthly limit assigned to the same case mix classification for an EW client.</p>	<p>Case mix classification is based on dependencies in activities of daily living (bathing, dressing, etc.), behavioral/cognitive needs, and need for clinical monitoring of medical treatments.</p> <p>As of January 2022, the maximum monthly amounts for EW services range from approximately \$2,944/month for the lowest acuity case mix (case mix L) to approximately \$8,886/month for the highest acuity (case mix K).</p> <p>Some EW individuals may be eligible for higher monthly budget if they are returning to the community after a nursing home length of stay of at least 30 days (“conversions”) or ventilator dependency.</p>