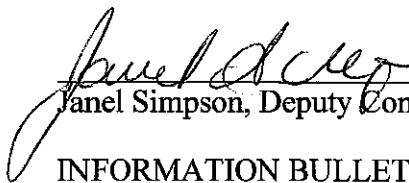


STATE OF CONNECTICUT
DEPARTMENT OF SOCIAL SERVICES
PROGRAM INFORMATION BULLETIN



Janel Simpson, Deputy Commissioner

Effective Immediately

Date

INFORMATION BULLETIN NO: 18-01

PROGRAM:

Revised 05/2018

AABD/Medicaid Long Term
Services and Supports

Subject: ImpaCT Processing of Rated Housing/Residential Care Home Cases

<p>Overview</p>	<p>Amendments to Connecticut General Statute § 17b-601 following the passage of Public Act 14-164, "An Act Concerning Direct Payment of Residential Care Facilities," enables the department to issue State Supplement payments for residents directly to rated housing facilities and residential care homes. ImpaCT is designed to make vendor payments to the providers without worker intervention when the Department of Social Services (DSS) determines there is eligibility for State Supplement or SAGA for an individual residing in a rated housing facility (RHF) or a residential care home (RCH). The manner in which these facilities and homes are reimbursed has also changed in ImpaCT.</p> <p>If an individual is found eligible for State Supplement or SAGA, facilities and homes can receive the per diem facility rate multiplied by the number of days in the same time period in which the resident is eligible. In transition months where there is an admission or discharge, ImpaCT, with some exceptions, will attribute the individual's income to their community expenses, and this income will therefore not be considered available for RHF or RCH expenses.</p> <p>For example, if an individual applies for cash in the month he or she is admitted to rated housing from the community and found eligible, the rated housing payment will be the number of days in the facility times the applicable per diem rate. This amount will be issued as a vendor payment to the RHF or RCH. No applied income will be allotted to the RHF or RCH for that month. The individual's income will only be considered for the purpose of calculating a community-based State Supplement benefit. However, ImpaCT will consider the individual's community-based and facility-based needs when determining the benefit amount for which the individual is eligible.</p>
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When recipients of State Supplement or SAGA permanently discharge from a home or facility, ImpaCT will also determine whether the individual is eligible for any community cash benefit and will again consider the individual's income for only the community-based State Supplement or SAGA benefit.

For active State Supplement or SAGA recipients that enter an RCH or RHF after the first of the month, the community benefit will have already been issued for that month and will not be considered an overpayment. The RHF or a RCH will then receive payment for the appropriate number of days, without any applied income considerations, based on the admission date.

Key points:

- ImpaCT will perform all necessary benefit calculations based on the living arrangement for the individual during the transition month using the appropriate disregards and Personal Needs Allowance (PNA) when correctly entered in the system.
- In most situations, no applied income will be allotted to the RHF or RCH payment in the months of admission and discharge.
- ImpaCT will send the vendor the correct amount of the cash award directly to the RHF or RCH via check or direct deposit. The client's portion, if any, will default to EBT.

ImpaCT procedures:

In order to make this process work correctly, when the individual transitions from one living arrangement to another, the Living Arrangement screen must be updated appropriately. For example, if an individual moves into a RHF or RCH from the community in the month of application, staff need to first enter the Living Arrangement value of "At Home" with the appropriate SSUP Housing Standard, using the system defaulted circumstance start change date (CSCD). Save this information by clicking the "Previous" or "Continue" button then return immediately to the Living Arrangement screen. Update the CSCD date to the day the individual was admitted to the facility and enter the Living Arrangement type. ImpaCT will indicate that there is a historical record on this page with the blue arrow on the bottom left of the page.

Scenarios

State Supplement

A disabled individual enters a rated housing facility from the community on 1/12/18 and an application requesting cash is received the same day. The facility has a daily rate of \$119.64. The client has unearned income of \$750/month and earned income of \$297.30. Before he was admitted to the facility, the client had a monthly community rent of \$300 and resided alone. The calculation is:

<u>Needs</u>	<u>Income</u>
\$300.00 Rent	\$750.00 Gross Unearned Income
\$170.06 PNA	<u>\$339.00 Disregard</u>
+ \$2,392.80 (per diem 20 days*\$119.64)	\$411.00 Net income
\$2,862.86 Total needs	

\$297.30 Gross wages
- <u>\$65.00 Disregard</u>
\$232.30
- <u>\$116.15 (Disregard ½ the balance)</u>
\$116.15 Countable Earnings

\$116.15 countable wages + \$411.00 net income = \$527.15 total net income.

ImpaCT will calculate the total net income of \$527.15 but will not consider it available when calculating the RHF payment. Because the individual's total net income is greater than the community need (Shelter and community PNA), no community benefit will be issued. Therefore a vendor payment is issued to the facility for the number of days multiplied by the per diem rate with no applied income consideration.

Ongoing, ImpaCT will calculate the needs using the monthly rate and boarding home PNA. This means that the total needs will be the monthly rate of the RHF minus the net income:

<u>Needs</u>	<u>Income</u>
\$29.95 PNA	\$750.00 Gross Unearned Income
+ <u>\$3,649.02 monthly rate</u>	- <u>\$246.70 Disregard</u>
\$3678.97 Total needs	\$503.30 Net income

\$503.30 net income + \$116.15 countable earnings = \$619.45 total net income

The monthly benefit will be \$3,059 (\$3,678.97 total needs - \$619.45 total net income, rounded down).

An active State Supplement recipient enters an RCH

A disabled client is active on community State Supplement and receives a \$137 monthly benefit. DSS receives a W-265 reporting an admission to a residential care home on 6/17/17. The client was living alone and had a

community rental expense of \$500. The RCH has a daily rate of \$124.59. The calculation is:

<u>Needs</u>	<u>Income</u>
\$400.00 Rent	\$772.00 Gross Unearned Income
\$170.06 PNA	- \$339.00 Disregard
+ \$1,744.26 (\$124.59 x 14 days)	\$433.00 Net income
\$2,314.32 Total needs	

ImpaCT will show the client comprehensive benefit amount as \$1,881.00.

- \$137.00 already issued to client as a community benefit
- \$1,744.00 payable to the RCH

ImpaCT will issue a supplement payment for the home. The \$137.00 is included in the total comprehensive benefit, but it has already been issued to the client and will not appear as part of the supplement.

Ongoing, ImpaCT will calculate the needs using the monthly rate and boarding home PNA. This means that the total needs will be the monthly rate of the rated housing facility minus the net income:

<u>Needs</u>	<u>Income</u>
\$29.95 PNA	\$772.00 Gross Unearned Income
+ \$3,789.61 monthly rate	- \$246.70 Disregard
\$3,819.56 Total needs	\$525.30 Net income

The monthly benefit will be \$3,294.00 (\$3,819.56 total needs - \$525.30 net income).

If the admission is not processed timely, then an overpayment amount will exist in the ongoing month. For example, in this scenario, the change occurred on 6/17/17 but was processed on 7/7/17; therefore, the client already received a July community benefit while in a residential care home. ImpaCT will show the \$137 as an overpayment amount and issue the \$3294 (benefit minus applied income) to the home for July. Valid client overpayments require supervisory approval.

An active State Supplement recipient discharges to the community

A client is active State Supplement and resides in a rated housing facility that has a daily rate of \$88.34. DSS receives a W-265 reporting a permanent discharge to the community on 3/31/17. The client has a pooled trust to divert his income in excess of 300% of the current SSI rate to make him eligible for State Supplement in the facility. The client is in receipt of a pension and has a current disability determination from Colonial Cooperative Care (CCC). The client moves into an apartment reporting no rental obligation. The calculation in the month of discharge is as follows:

Needs
 \$0.00 Rent
 \$170.06 PNA
\$2,650 (30 days * \$88.34)
 \$2,820.06 Total needs

Income
 \$2,565 Gross Unearned Income
 - \$360 Pooled Trust contr.
- \$339 Disregard
 \$1,866 Net Income

The facility will be paid \$2,650 and the case will be in Spend Down status as of April. Because we do not pay facilities on the date of discharge, the client will receive the community disregard and PNA for their community needs. The facility will receive payment in full with no applied income considerations. ImpaCT will appropriately place the individual in a Spend Down of \$8,055 the month following discharge, using the net income calculation of \$1,866:

$(\$1,866 \text{ Net income} - \$523.38 \text{ MNIL} = \$1,342.62) * (6 \text{ months})$

An active State Supplement recipient residing in rated housing discharges to another RHF

A client is active State Supplement and resides in an RHF. DSS receives a W-265 reporting a permanent discharge from one facility and admission to another on 2/15/18. The client has a monthly unearned income of \$750.00. The calculation is as follows:

<u>Needs Facility #1</u>	<u>Needs Facility #2</u>
\$1,670.34 (14 days * \$119.31)	\$1,345.26 (14 days * \$96.09)

\$1,670.34 Facility #1	<u>Income</u>
+ \$1,345.26 Facility #2	\$750.00 SSI
+ <u>\$29.95 PNA</u>	- \$246.70 Disregard
\$3,045.55 Total combined needs	\$503.30 Net Income

\$3,045.00 Total Needs
- \$503.30 Income
 \$2,541.00 Total Comprehensive benefit

A vendor payment will be made to facility #1 for \$1,670.00. The remaining benefit of \$871.00 (\$2,541.00 - \$1,670.00) will be paid to facility #2.

ImpaCT is designed to take care of the needs of the facility where the client was residing at the first of the month. Therefore ImpaCT will calculate the total needs for each facility and compare income to the total needs. If the benefit exceeds the needs for facility #1, the remainder will be sent to facility #2. The client's net income will make up any shortfall in funds due to Facility #2.

SAGA

A recipient of X02 and SAGA, enters a RCH on 7/3/17. The client was residing with another individual in the community and reported a \$400 community rental obligation. In this scenario the individual is medically unemployable for six months or more with the next medical review due in July 2018. The RCH has a per diem rate of \$119.64. ImpaCT will calculate the SAGA facility benefit based on the number of days multiplied by the per diem rate. ImpaCT will issue a supplemental payment for the home. The \$219 is included in the total comprehensive benefit, but it has already been issued to the client and will not appear as part of the SAGA payment.

<u>Needs</u>	<u>Income</u>
\$3,469.56 (\$119.64 per diem rate * 29 days)	\$0
<u>+ \$219.00 SAGA community benefit</u>	
\$3,688.56 Total Needs	

Ongoing, ImpaCT will calculate the needs using the monthly rate of the home. This means that the total needs will be the monthly rate of the RCH in full.

<u>Needs</u>	<u>Income</u>
\$3,629.00 Monthly rate	\$0

Manual Issuance

If a manual issuance is required, please verify the correct amount. To complete a manual issuance, obtain the Cash EDG and the vendor ID# for the facility. Go into Benefit Issuance under right navigation and follow these steps:

- Sub menu – Manual issuances
- Complete with all appropriate info (EDG, CASE #, correct Payee, cash program)
- Click submit
- You will receive the following message if the issuance is over \$1,000 of *“Issuance Amount entered is greater than or equal to \$1,000.”* Click submit if amount is correct
- If successful, amount will say *“Update Successful”*

Send to supervisor for approval and complete narrative

Rate Changes/COLA's

ImpaCT will allow for automatic updates of the cash benefit and the amount paid to vendors when there are rate changes, COLA's, etc. No manual intervention will be required at the time of these changes for correct payment issuance.

Facility Overpayments

The Benefits Accounting Unit at Central Office will be notified of facility overpayments via the alert system in ImpaCT. Overpayment alerts (Alert Type 1801) will be generated when a facility overpayment exists. There will no longer be a need for manual removal of BEG's or email's to the Benefit Accounting unit for general recoupment purposes.

Payments to Rated Housing Facilities and Residential Care Homes

- If an action creates a facility overpayment, Benefits Accounting will be able to access via alert to pursue recoupment. The amount should be confirmed by staff.
- The 1801 alert is the formal record of overpayment to the facility so it must be reviewed and verified to ensure appropriate recoupment of funds that were paid in error.
- If after reviewing the alert the worker finds the system created an overpayment in error, whether due to worker action or other reasons, the alert must be marked "Complete" in the Alerts Module. This will ensure that erroneous information will not be sent to Benefits Accounting for recoupment.
- Client overpayments – Worker takes the action, authorizes the case, an overpayment generates in the overpayments module and an alert goes to the staff member's supervisor.

Payments will be issued directly to RCFs and RCHs without the need for worker intervention. The payment method will revert to check automatically. Providers also have the option of direct deposit in ImpaCT, by submitting a completed Vendor Direct Deposit Form (W-260) to Benefits Accounting.

Bed Holds

The Living Arrangement should remain as Licensed Boarding Home when an individual has been admitted to a nursing facility and is on a valid bed hold, (i.e. expected to return to the boarding home by the end of the month following the month of discharge as confirmed on a completed W-265). Do not enter a discharge date for the boarding home in the facility screen in these circumstances. Click the "Add Facility" button and enter the nursing home admission information on the new Facility Screen. Make sure to set a manual 450 alert to check if the client returns, and enter a corresponding case note. If the individual returns to the facility prior to when the bed hold ends, the appropriate discharge date from the skilled nursing facility in the nursing home record should be entered. No other changes are required. If the bed hold ends prior to the last day of the month following the month of discharge or they have reached the last day of their bed hold and the individual has not returned to rated housing, enter the appropriate discharge date on the facility screen in the boarding home record.

If the client returns to rated housing after the end of bed hold, change the living arrangement to skilled nursing as of first day of month after bed hold ended. Then change living arrangement back to licensed boarding home with CSCD date of the date the client returned. These individuals will require a new application to restart the cash program.

Important points

- Please note, that the Living Arrangement entries have to account for every day of the month – there can be no gaps.

	<ul style="list-style-type: none"> • Please make sure to update all fields in the Facility Details page, including the Admitted From and Discharged to fields, as eligibility rules use these entries to calculate appropriate disregards. • When an individual is transitioning from the community to a boarding home or vice versa, make sure to update the client's rental obligation in the Shelter expense detail page in the month of transition. Be sure to answer YES to: Is the HH currently occupying the shelter for which expense is incurred? • In Wrap Up, the Issuance Screen will indicate that the benefit will go directly to the facility via check. The client's name will also be listed and should default to EBT. • On SAGA cases, please remember the importance of having a valid W-650 sent to SSA within 30 days of signature. Remember, that W-650's must be completed prior to the grant. Staff will be asked in the Cash Work Exemption screen to note if the completed W-650 has been submitted by the client.

Disposition: Please retain this bulletin for future use
Distribution: DSS Regional Office Staff
Responsible Unit: Eligibility Policy and Program Support 860-424-5250
Date Issued: