



PCOA
Aging well for life

A.L.T.C.S.

Arizona **L**ong-**T**erm **C**are **S**ystem

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What you'll learn today

What is ALTCS?

What determines eligibility?

- Medical

- Financial

- Potential complications

What's next?

- ALTCS intake process

- Services and case management

Long Term Care is expensive

How do people pay for long term care?

- Long term care insurance
- Savings—people can work hard their entire lives and not be able to afford these services
- Veterans benefits (helps but doesn't cover the full cost)
- Not Medicare (only pays for short rehab care)
- Medicaid long term care programs (ALTCS)

A.L.T.C.S.

- **Arizona Long-Term Care System**
- A part of AHCCCS (Arizona Health Care Cost Containment System)
- Arizona's version of Medicaid

A.L.T.C.S. provides funding for:

- Nursing Home Care
- Assisted Living
 - Adult Foster Care (4 or less)
 - Adult Care Homes (10 or less)
 - Assisted Living Centers
- Home and Community Services
- *Must meet Medical Criteria*



To start your application call:

Eligibility: AHCCCS

1(888) 621-6880

The eligibility process typically takes 45 days.

Eligibility Requirements (Determined by AHCCCS)

- **General** – Initial application
- **Financial**
 - **Income** – W-2s, 1099s, etc.
 - **Resources/Assets** – Financial statements
- **Medical** – Pre-Admission Screening

General Eligibility (need all)

- Must be a U.S. citizen or have legally been in the United States for more than five years
- Must have a Social Security Number
- Must be a current resident of Arizona; one day is sufficient to establish Arizona residency

\$\$\$ Financial Eligibility\$\$\$

Income vs. Assets

- There are some people who rent, only own one vehicle are below the income cap and have no assets/resources. For those people the financial assessment process will be fairly simple.
- In other cases someone may have two vehicles, have some savings or have a higher income. These factors will require additional review.
- First, we will give you the basic eligibility information and then we'll discuss the more complex scenarios.

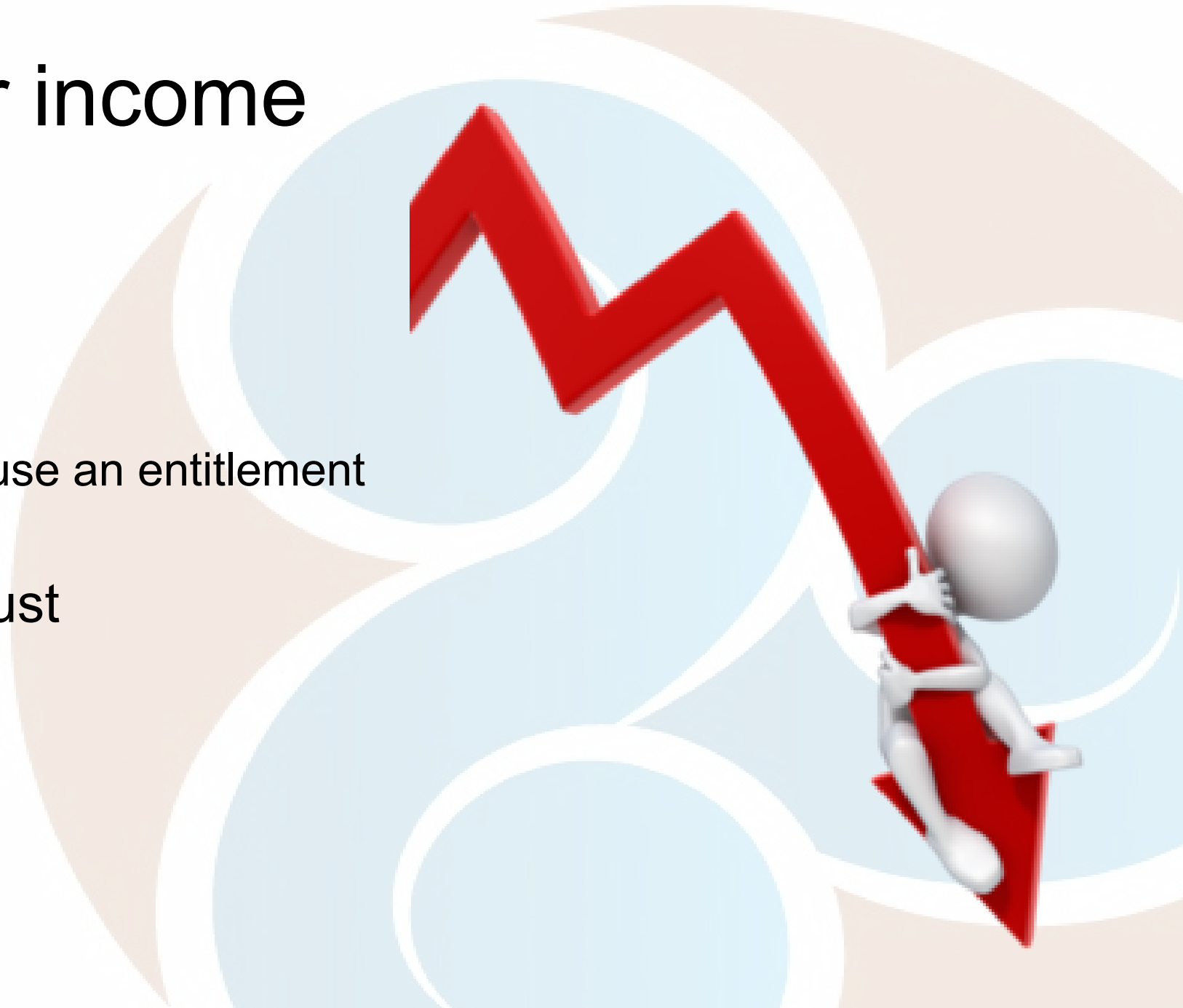
Income Eligibility

- **Gross Income**: All income received may not exceed \$2,742 per month for the applicant
- If applicant's income is over limit, the state looks at a married couple's joint income which may not exceed \$5,484 per month
- One cent over and you are ineligible



If you are over income you can try to:

- Reduce income
 - **BUT:** You cannot refuse an entitlement
- Set up an Income Trust



Income Trust (Miller Trust)

- If income > \$2,742 and less than the average cost of care (\$8,000), you may use a special *income only trust*
- A Miller Trust is a special type of bank account
- All or part of the applicant's income goes into the trust
 - Share of cost is paid from the trust less allowable expenses
 - Trust is payable on death to AHCCCS
- PCOA recommends speaking to an attorney when a Miller Trust is needed.
 - Most applicants **do not** need paid assistance to apply for ALTCS if they are not in need of a Miller Trust.

Resource Eligibility

- All assets are counted (including trusts) except: PERSONAL EXEMPTIONS (NOT IN TRUST)
 - Value of home (up to \$688,000)
 - One car (for medical transportation)
 - Burial plots
 - Burial funds (limited to \$1,500)
 - Life insurance (if less than \$1,500)
 - Household goods, including wedding ring, pets, and tools used for income, etc.

Resource Limit

- The eligible individual may keep up to **\$2,000** in **countable assets** and still be eligible for ALTCS
 - If both Spouses are applying and live in a skilled nursing facility, then each applicant can keep \$2,000. If both Spouses are applying and are still living in their home the Community Spouse regulations apply.
- If you have accumulated one cent more, you may find yourself ineligible for that month



For a Couple

- The Community Spouse is protected by Federal “Spousal Impoverishment” guidelines
 - Assets less than **\$29,724** CS keeps the total
 - Assets greater than **\$29,724** are subject to resource assessment
 - The Community Spouse may keep half of the countable assets at the time of initial medical eligibility up to the Maximum Community Spouse Resource Deduction **\$148,620**

(See AHCCCS info sheet “ALTCS Policies on Community Spouse”)

Examples

	Couple #1	Couple #2	Couple #3
Joint Assets	\$200,000	\$100,000	\$26,000
Asset Limit/Com Sp Share	\$100,000	\$50,000	\$26,076
Resource Limit Spouse on ALTCS	\$2,000	\$2,000	\$2,000
Eligibility Target	\$102,000	\$52,000	NOW
Spend down	\$98,000	\$48,000	0

Resource Assessment

- Should be requested at time of initial medical eligibility even if you know you are not financially eligible
- This will give you a target to aim for and time to plan

Resources: Spend Down to Eligibility

- Care of applicant
- On anything for applicant or spouse
- Pay off debts (after Resource Assessment)
 - Pay off mortgage
 - Buy new car
 - Fix house
- BUT: Do not give away within 5 years of being eligible for services



The Deficit Reduction Act of 2006 Warns That:

- If you give away or transfer property for less than market value within 60 months of applying, you will be ineligible for a period of time
- **Ineligibility = Total \$'s given away/\$8,000 (average cost of care)**
 - i.e. \$32,000 given away in last 5 years
 - $\$32,000/\$8,000 = 4$ mos. of ineligibility from date individual would otherwise be eligible
- ***You may appeal based upon hardship***

VA Aid and Attendance

- This is a benefit for Wartime Veterans or Surviving Spouses who are financially and medically eligible and need financial assistance paying for their care.
 - ALTCS does **NOT** count the benefit amount as income when determining eligibility
 - ALTCS **DOES** count this amount when determining Share of Cost for **nursing home placement only**. They do **NOT** count it when the person is paying room and board to live in an alternative community setting such as assisted living.

Call the Arizona Department of Veteran's Services for more information: (800) 852-8387, select option 3 for Southern AZ



Medical Eligibility

- **P.A.S.** (Pre-Admission Screening) Point Based Method of Eligibility Determination
- Applicant must require a level of care provided at an **intermediate level nursing facility** even for in-home services

Applicants are assessed by a social worker or nurse who:

- Conducts face-to-face interviews
- Reviews medical records
- Assesses activities of daily living (toileting, bathing, grooming, eating, mobility, transfer) and sensory impairment, orientation, and behaviors



A family member can (and should) provide input to A.L.T.C.S.

- The applicant may try to show the assessor how well they are doing
- What is needed for eligibility is to show how incapacitated they really are
- Applicants will not tell a stranger about incontinence or dementia
 - **Incontinence** scores high on the PAS
 - **Dementia** also scores high

Sample PAS Questions: Bathing

Question: How well can the applicant bathe or shower? The ability to transfer to shower or bath, and to bathe or take sponge baths for the purpose of maintaining adequate hygiene and skin integrity.

0 pts. INDEPENDENT – Applicant is independent in completing activity safely

1 pts. SUPERVISION/LIMITED OR CONDITIONAL HANDS-ON – Applicant requires set-up help or reminding -can bathe safely without continuous assistance or supervision OR requires limited/occasional hands-on assistance (e.g. washing back or paralyzed limb)

2 pts. HANDS-ON – Customer may need assistance transferring and may not be able to get into and out of the tub alone OR requires stand-by assistance throughout bathing activities in order to maintain safety

3 pts. TOTAL DEPENDENCE – Customer is dependent on others to provide a complete bath

Now you're eligible! What's next?

- You'll be asked to choose a plan
 - Services/Case Management:
 - Banner – University Family Care: 1(833) 318-4146
 - Mercy Care: 1(800) 624-3879
- You'll be assigned a case manager and will schedule a home visit
- You'll work with the case manager to develop a plan of care

The importance of contracted facilities

If the applicant is living in or plans to move to a nursing home or assisted living facility, make sure the nursing home or assisted living facility is contracted with an ALTCS plan.

To find out if a facility is contracted, call the plans directly.

- Banner – University Family Care: 1(833) 318-4146
- Mercy Care: 1(800) 624-3879

If you are looking for a placement, one option is to talk with a referral agency.

Coordinating Medical Costs

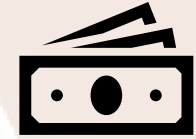
If you currently have:

- AHCCCS

- AHCCCS coverage changes to your chosen ALTCS plan

- Medicare

- Keep your current Medicare plan (or change, if you choose)
 - Medicare is your primary insurance—billed first
 - Your ALTCS plan is your secondary insurance—billed for co-pays and deductibles
- Tell your doctors, pharmacy, etc. you're enrolled with your ALTCS plan
- Your ALTCS plan pays for co-pays—**IF you use a contracted provider**



What is a Share of Cost?

- Share of Cost is a monthly fee that people living in residential placement pay to cover room and board.
- Residential placement could be either assisted living or a nursing home

The amount each person pays:

- Equals income, less:
 - \$137.10 Personal Needs Allowance
 - \$164.90 Medical Insurance (Part B)

Share of Cost of Individual to the Facility

Income	\$1,500
Personal Needs	(\$137.10)
Medicare Part B	(\$164.90)
Share of Cost	\$1,198

Share of Cost when ALTCS member's spouse lives in their own home

- Community spouse keeps all income in their own name
- If less than **\$2,177.50** monthly (the monthly minimum spousal need allowance) then
 - Community spouse may also keep a portion of their spouse's income to bring it up to the minimum (\$2,177.50)

Share of Cost for a person with a community spouse—an example:

	Spouse on ALTCS	Community Spouse
Income	\$2,000	\$1,000
Personal Needs	(\$126.15)	
Medicare Part B	(\$170.10)	
Com SP Share	(\$1,177.50)	\$1,177.50
Share of Cost	\$526.25	
Com SP Net		\$2,177.50

What happens to your house upon your death?

- Estate recovery may or may not apply to you
- The State may claim reimbursement for services provided for their value
- Recovery may not be limited to the Probate Estate of the recipient of services
- Property held in joint tenancy, tenancy in common, beneficiary deed and life estates may be subject to recovery

Estate Recovery Undue Hardship Waiver

AHCCCS may waive the claim against the estate when the heir meets the undue hardship criteria:

- Currently resides in the residence;
- Resided there at the time of the ALTCS member's death;
- Has made the residence their primary residence for 12 months prior to member's death; and
- Owns no other residence

For Further Information about Estate Recovery:

- Please see the State of Arizona
- Medicaid Assistance Estate Recovery Program brochure and other information sheets are available on the web at www.azahcccs.gov/Members/Publications/



Thank You

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PCOA's End of Life (EOL) Program

Offers a wide range of relationally sensitive and culturally relevant services at no cost:

- Community education workshops (describing the importance of completing documents and having EOL conversations with physicians, loved ones, and friends)
- Document templates for Medical and Mental Health Powers of Attorney, and Living Wills
- One-on-one coaching (to understand EOL planning and to complete Advance Directives)
- Facilitation of EOL conversations with loved ones and friends
- Resources from EOL planning and Advance Directive experts

For questions or assistance, reach out to our End of Life Team by contacting the PCOA Helpline at (520) 790-7262.