







#### **Executive Office of Elder Affairs**

RESPECT INDEPENDENCE INCLUSION

The EOEA Home Care Program
MCLE Training
April 30, 2024







#### **Executive Office of Elder Affairs Mission**

#### Mission

The Executive Office of Elder Affairs promotes the independence, empowerment, and well-being of older adults, individuals with disabilities, and their caregivers.

#### Vision

Older adults and individuals with disabilities will have access to the resources they need to live well and thrive in every community in the Commonwealth.

#### **Values**

- We value growing older
- We value choice, including the choice to live in the community
- We value the contributions that older adults and individuals with disabilities make to society
- We value a person-centered approach that promotes dignity and takes into account cultural identities
- We value collaboration with our partners, advocates, and other stakeholders



# Agenda

- What is an Aging Services Access Point (ASAP)?
- Home Care Eligibility & Services
- The Role of the ASAP RN
- Frail Elder Waiver (FEW) Overview
- Self-Directed Service Delivery and Additional Program Options
- How Do I Make a Referral to an ASAP for services?
- Questions

# What is an Aging Services Access Point (ASAP)?

### **ASAP Functions**

An ASAP is a regional agency that contracts with the Executive Office of Elder Affairs (EOEA) and provides programs and services to older adults and individuals with disabilities

There are 24 ASAPs in Massachusetts that are designated by EOEA ensuring coverage across the commonwealth.

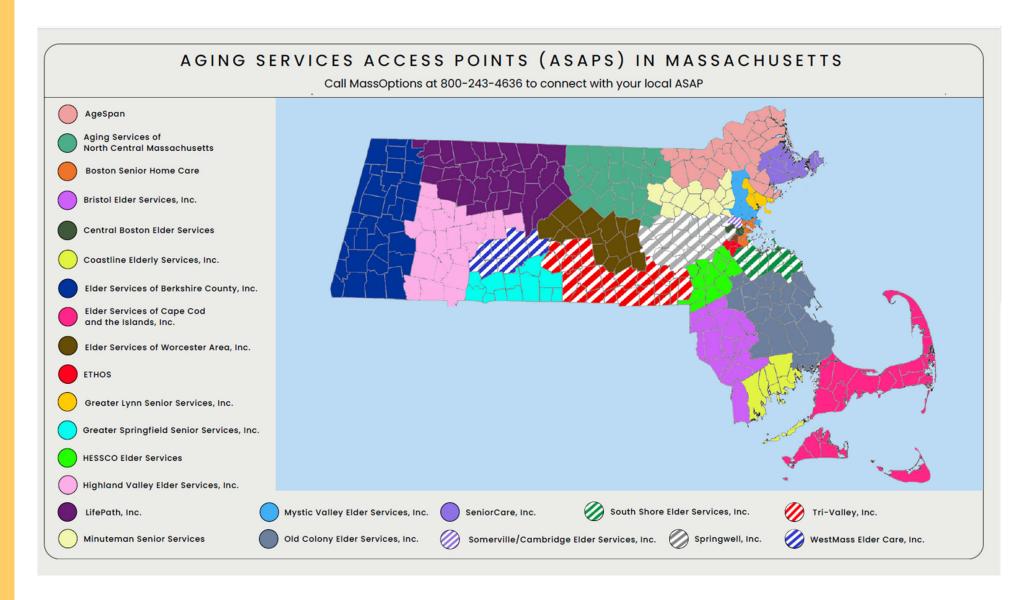
ASAPs are defined in Massachusetts Law M.G.L. 19A

Provides assistance regardless of income or eligibility

Provides programs & services to older adults and individuals with disabilities

Provide resource/community service information at no cost.

# **ASAP Map**



https://www.mass.gov/location-details/aging-services-access-points-asaps-in-massachusetts

### **Aging Services Access Points (ASAPs)**

# Home Care Program Functions

#### **Care Management**

- Eligibility & Assessment
- Enrollment
- Advocacy & Education

#### **Care & Support Coordination**

- Authorization & purchase of Home Care services
- Coordination of comprehensive community care
- Management of procured provider network
  - Provider vetting and monitoring
  - Negotiation of rates and services

# Other ASAP Functions

Clinical Assessment & Eligibility for Medicaid-funded institutional & community-based care
Nutrition (home-delivered meals)
Information & Referral
Community Transitions Liaison Program (CTLP)
Options Counseling
Adult Protective Services (APS)
Family Caregiver Support Program (FCSP)

# Home Care Eligibility & Services

# **EOEA Home Care Program**

The Home Care Program provides care management and in-home support services to help older adults, people with disabilities, and people with Alzheimer's Disease or related dementia successfully age in place within Massachusetts. Services are available based on assessed needs.



# Age & Residence Eligibility

Age

- 60 years of age and above
- Under age 60 with a diagnosis of Alzheimer's or related Dementia disorder

Residence

- Resident of Massachusetts
- Not living in an institutional setting or Assisted Living Residence

\*A referral can be made, and an intake can be conducted for the Home Care Program for applicants transitioning to the community prior to leaving a facility

10

# Function & Need Eligibility

#### Functional Impairment Level (FIL):

Require assistance with at least One Activity of Daily Living (ADL)

#### OR

6 or more Instrumental Activity of Daily Living (IADL) impairments
 AND

Intervention that Home Care will provide to meet this need at the time of enrollment - a critical unmet need (any ADL, meal preparation, food shopping, home health services, medication management, Respite, transportation for medical treatments)\*

# Exceptions to the Home Care Eligibility (only need 4 IADLs): At Risk: Older Adults who are at risk due to a variety of factors, including, but not limited to substance abuse, mental health problems or cultural and linguistic barriers. Protective Services: Older Adults who are receiving or are eligible to receive Protective Services. Congregate Housing: Older Adults residing in a Congregate Housing Facility. Waiver Consumers: Older Adults who are eligible for the Home and Community Based Waiver Program.

### **Cost Share**

- Any Income
- A co-pay can only be assessed after a financial assessment has been completed
- Cost share contribution based on Income & MassHealth:
  - Annually adjusted based on cost of living adjustment (COLA)
  - Exceptions to income: some VA benefits, pooled trust, etc.

Coct	Share	Sabac	
	olimi o	<b>OUITO</b>	

Voluntary Donation	Fixed Monthly Max Copay (ranges from \$10-\$199, not to exceed actual cost of qualifying services)	% Based Monthly Copay (based on qualifying services received)
Individuals whose annual income is below \$15,460	Based on a sliding scale, Individuals whose annual income is \$15,461 - \$34,733	Based on a sliding scale, Individuals whose annual income is \$34,734 and above
A couple whose annual income is below \$20,820	Based on sliding scale, A couple whose annual income is \$20,821 - \$49,145	Based on a sliding scale, A couple whose annual income is \$49,146.00 and above

MassHealth members whose income is at or below 300% SSI FBR (\$2,829/month in 2024) will not have a copayment for Home Care Services, including Medicare Savings Plan

#### **The Home Care Program**

Home Care Basic/Non-Waiver

Home Care / Percent Based

**Enhanced Community Options** 

Home Care Basic/Waiver\*

Community Choices\*

<sup>\*</sup> Frail Elder Waiver Program, MassHealth Standard (Expanded Income Eligibility – 300% SSI FBR)

#### **Home Care Services**

#### In-Home Services

- Homemaking
- Personal Care
- Home Health Aide
- Companion
- Supportive Home Care Aide
- Home Delivered Meals
- Nutrition
   Assessment
   and Counseling
- Alzheimer's Dementia Coaching
- Vision Rehabilitation
- Orientation and Mobility

#### Community Based Services

- Delivery of prepackaged medication
- Home Safety/Indepen dence Evaluation (Occupational Therapy)
- Behavioral Health Services
- Peer Support
- Adult Day Health
- Supportive Day Program
- Respite Care
- Medication Dispensing Machines
- Laundry
- PERS/Enhanced PERS
- Transportation
- Grocery Shopping

#### Home Modifications

- Chore
- Goal Engagement
- Environmental Accessibility Adaptations

#### Home Health Services

- Home Health Aide
- Complex Care Training and Oversight (Skilled RN)
- Home Safety and Independence Evaluation (Occupational Therapy)
- Physical Therapy
- Speech Therapy

#### Electronic Supports

- Assistive Technology Device
- Electronic Comfort Pets (non-waiver)
- Virtual Communication and Monitoring
- Homebased Wandering Response Systems

Home Care Services | Mass.gov

# **Home Care Programs**

Individual Care Plans are developed and implemented based on a consumer's unique and specific needs

Home Care Basic-Non-Waiver & Home Care / Percent Based

**Enhanced Community Options (ECOP)** 

HCBS Frail Elder Waiver (FEW) MassHealth Only

### Basic level of care needs

#### **Example Care Plan #1:**

- Home Delivered Meals 5 meals/week
- Homemaking/Personal Care 2-3 hours/week

#### **Example Care Plan #2:**

- Home Delivered Meals 3 meals/week
- PERS Monthly
- Homemaking 1.5 hours/week

### Nursing Facility Level Of Care Needs

#### **Example Care Plan #1:**

- Home Delivered Meals 5 meals/week
- PERS Monthly
- Homemaking/Personal Care 2-3 hours/week

#### **Example Care Plan #2:**

- Adult Day Health 1 day/week
- Homemaking 1.5 hours/week
- PERS Monthly

#### Nursing Facility Level Of Care Needs: 2 Types of Programs based on Formal Support Needs

#### Home Care Basic-Waiver Example Care Plan:

- Home Delivered Meals 5 meals/week
- Homemaking/Personal Care 3 hours/week
- Informal Supports
- Lower Formal Support Need

#### **CHOICES**

- Informal Support
- Higher Formal Support Need
- · Services to meet needs
- Up to 24/7 care

Sample Care Plans Based on Program above

### **Benefits of Home Care**

#### Care Management

- Management of care plan
- Engagement with provider
- Connection to other community resources/partners

#### Provider Network

- Meets qualifications set by EOEA
- Meets programmatic standards
- ASAP contracted, monitored & audited

#### Service Rates

- Negotiated based on all ASAP Business
- Less expensive than Private Pay
- State set for certain MassHealth services

#### Advocacy

- Use ASAP Network of services & providers vs. having to navigate on your own
- Benefit of having an advocate to address concerns

# Consumers with a High % Co-Pay

- Benefits of HC Enrollment vs. Private Pay
- No minimum service plan required
- Centralized care coordination by Care Managers

# Care Planning & Care Management

#### Initial Assessm<u>ent</u>

- Initial on-site assessment (OSA) to determine consumer eligibility
- Functional Needs Assessment and identification of supports in place
- Initial Service Plan developed with consumer to address identified unmet needs

#### Ongoing Assessment

- Visit schedule of an OSA at least every six months
- Reassessment of Functional Needs
- Ongoing review of care plan/service plan and consumer satisfaction

#### Annual Assessment

- Annual re-determination of home care program eligibility
- Review of care plan/service plan and consumer satisfaction
- Annual re-determination of personal care needs, as well as clinical eligibility for waiver and ECOP by ASAP RN

# The Role of the ASAP RN

# Clinical Assessment & Eligibility (CAE)

#### MassHealth Screenings:

- Adult Day Health
- Group Adult Foster Care
  - Eligibility screens completed by Coastline Elderly Services only
- Frail Elder Waiver Clinical Eligibility
- Nursing Facility Clinical Eligibility
  - Pre-Admission Screenings
  - Post-Admission Screenings

#### **State Home Care Screenings:**

- ECOP Clinical Eligibility
- Personal Care Determinations (PC, SHCA, HHA)

# Frail Elder Waiver (FEW)

# **HCBS/Frail Elder Waiver Eligibility**

#### Requires nursing facility level of care (LOC)

Clinical Eligibility Criteria based on Federal Requirements

#### Participants must be financially eligible for MassHealth

- Financial Eligibility for HCBS Waivers based on Federal Regulations
- MassHealth is the only entity that can determine financial eligibility

#### Applicants Income (Spouse's Income not Reviewed)

- Below 300% SSI Federal Benefit Rate
- 2024 300% SSI FBR is \$2,829

#### Assets 2024

- Requirement for applicant is \$2,000
- Countable limit on applicant's spouse is \$154,140

# **FEW Options**

- Higher income threshold for MassHealth eligibility allowing consumers who need a nursing facility level to care to access MassHealth
- Access to MassHealth State Plan Benefits
- Option to enroll in a Senior Care Options (SCO) Plan
- Applicant's single/individual income and assets is reviewed for eligibility
  - Spouse's assets are considered

#### Home Care Basic-Waiver

- For older adults with involved supports (Informal & Formal)
- Receiving some formal supports through home care
- Consumer accessing state plan services (such as ADH, PCA)
- Support through Home Care may be supplementing state plan services

#### **Choices**

- Minimum care plan cost
   1.75x Basic POS Rate
- For older adults needing significant formal supports through home care
- Up to 24/7 Care
- Informal supports
- Consumer accessing state plan services (such as ADH, PCA)

### **Application Process: Financial Eligibility**

# MassHealth is the <u>only entity</u> that can determine Financial Eligibility

- Financial Eligibility for waiver includes an asset test
  - Consumers <u>under</u> age 65 with MH Standard will need SACA
  - Consumers <u>under</u> age 65 must be formally disabled
  - Consumers <u>over</u> age 65 must complete SACA



### **Application Process: Clinical Eligibility**

# ASAPs conduct all Initial FEW Clinical Screenings and any annual redeterminations for ASAP Home Care enrolled consumers

- Individuals who are eligible for FEW and enroll in a Senior Care Options (SCO) Plan
  - SCO RNs will complete the annual redetermination for SCO enrolled FEW members
- ASAPs have a process for review of clinical denials of FEW clinical eligibility
  - Recommend internal Nursing Quality Review for all Denials
    - Denials are appealable
    - Must be linked to MassHealth NF regulations 130 CMR 456.409

# **Maintaining Waiver Eligibility**

- Consumers are visited & assessed a minimum of 2x/year for an in-home assessment
- Consumers must have one waiver service scheduled monthly in order to maintain waiver status
- Waiver clinical eligibility is re-determined every year to ensure consumer remains Nursing Facility eligible
- MassHealth will collect updated income & asset information annually

# Self-Directed Service Delivery Options

# **Self-Directed Service Delivery Options**

#### **Consumer Directed Care** (CDC)

- A self-directed service delivery option for non-waiver enrolled consumers in accordance with EOEA PI-18-02
- Consumer can choose to recruit, train and hire their own worker for personal assistance services
- ASAP assesses need & authorizes an average number of hours per week, is responsible for the overall management of program service costs within the limits for HCB-NW and ECOP program

#### **Services Offered**

- Homemaking
- Personal Care
- Home Health Aide
- Transportation
- Chore
- Companion



# **Self-Directed Service Delivery Options**

#### Veteran's Independence Plus Program (VIP)

#### **VIP Program serves**

- Veterans of any age
- at risk of nursing home admission
- Supports family Caregivers



#### **VIP Program qualifications**

- Receive primary care at VAMC (Veteran's Administration Medical Center)
- Have a VA primary care team
- Meet the eligibility criteria for home and community-based services as determined by VA
- Receive a referral to VIP Program from the VAMC

#### ASAP case manage VIP enrollees (Care Advisor)

# **Additional Program Options**



#### **Community Transition Liaison Program (CTLP)**

#### **Program Description:**



The Community Transition Liaison Program (CTLP) supports nursing facility residents in transitioning to the community. CTLP supports any resident (age 22+) of a nursing facility (regardless of insurance) who is interested in receiving support & assistance to transition to the community.

#### The CTLP Team Weekly:

Engages with residents who are in the nursing facility to understand if they are interested in returning to the community

Provides informed choice on community transition options

Provides assistance & coordination with discharge planning

Connects residents to state programs & local community supports

Assists the resident in mitigating issues that may impact their ability to successfully transfer to the community

### **Hospital to Home Program**



#### **Program Description:**

The focus of the Hospital to Home Partnership Program (HHPP) grant is to build partnerships between Acute Care Hospitals (Hospitals) and ASAPs and to strengthen communication and coordination with community providers to promote skilled nursing facility diversions, and to improve hospital discharge rates from Hospitals directly to home and community-based settings.

# Grant included funding for HCBS Hospital Liaison and/or Innovation programs

- The embedding of ASAP staff within the hospital to serve as HCBS
   Hospital Liaisons to help connect individuals ready for discharge to
   HCBS alternatives
  - All current HHPPs are HCBS Hospital Liaison programs
    - ASAP staff have hospital privileges
- Innovations to help individuals transition from a hospital to their home, which may include improvements (including technology) to share information more effectively or mitigate discharge barriers

# Title III Meals



- The Senior Nutrition Program provides nutritious meals to older adults who are unable to leave their homes due to illness, disability or frailty through the Home Delivered Meals Program.
  - Supper & weekend meals are also available in some areas
  - Nutrition assessments & nutrition counseling provided to older adults at nutritional risk
- Who Qualifies?
  - People aged 60 or older if they:

Have physical, emotional, or cognitive impairments, or have inadequate kitchen facilities, resulting in an inability to prepare nutritionally adequate meals

Are unable to attend congregate meal sites

Have no one to help with meal preparation

Meet home delivered meals intake criteria

Act as a caregiver to an immediate family member, and the family member is disabled

No income eligibility review required

#### **Family Caregiver Support Program (FCGS)**

National Program implemented by Elder Affairs through ASAPs

Family Caregiver Support Program

Funded primarily with Federal Title III-E funds; with limited state and local agency funds

Program with a multifaceted approach that supports the Caregiver

# Caregiver Specialist

# Caregiver Specialist focuses on supporting the Caregiver

- Conducts caregiver assessments
- Develops a caregiver action plan
- Provides personal assistance in connecting caregivers with resources and services which may include:
  - Respite care options
  - Supplemental Services
- One-on-one counseling & coaching
- Identified training in group settings or for individuals
- Facilitates family meetings

### Who is a Caregiver in the FCGS Program?

- A family or informal caregiver who is:
  - caring for an individual aged 60 or older, or someone with Alzheimer's
  - a grandparent aged 55 or older caring for a child age 18 or younger
  - over the age of 55 caring for a disabled individual between the ages of 18-59; can be the parent

 Contact the Massachusetts Family Caregiver Support Program: Local ASAP 1-800-243-4636 or www.mass.gov/caregiver

### Other EOEA Programs

Assisted Living Operations – Certification & Ombudsman

Aging & Disability Resource Consortia

Home Care Programs Nutrition Title III
Programs

Protective Services

Family Caregiver Support Program

Information & Referral

Community Care Ombudsman

Long Term Care
Ombudsman

Council on Aging

Prescription Advantage

Senior Employment

SHINE

# How Do I Make a Referral to an ASAP for services?

# How Can Information and Referral Help?

#### Resources

- Entities that could meet needs or desires (hairdressers, podiatrists, meal delivery services)
- Senior Living Advisors
- Housing
- Weatherization Assistance
- Public Benefits (SNAP, Health Insurance, Fuel Assistance)
- Legal
- Transportation
- Senior Centers/Councils on Aging
- · Veteran's Benefits

#### Referrals

- Internal (Home Care, Nutrition, Family Caregiver Support, etc.)
- External (Personal Care Attendant, Adult Family Care, Senior Care Options, Program for All Inclusive Care for the Elderly, Group Adult Foster Care, etc.)

All information and consultations provided by Information and Referral staff are FREE!

# Helpful Information to Have When Referring to Home Care



# MassOptions (800) 243-4636

4 Easy Ways to Reach Us



#### Call

Call us anytime, from 9:00 AM to 5:00 PM.

800-243-4636



#### **Online Chat**

With a MassOptions Specialist Monday-Friday 9:00 AM-5:00 PM



#### **Get a Referral**

To view local services, complete an easy referral any time



#### **Questions?**

We'll contact you in 1 business day

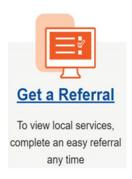


Call back if your needs ever change! 1-800-243-4636

Back To Top

#### www.MassOptions.org

# Find the Aging Services Access Point (ASAP) covering your area

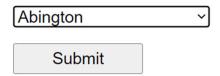


- Click on "Get a Referral"
- Choose "Aging Service Access Point (ASAP)"
- Choose your town or city from the drop-down list.

#### Which agency would you like to connect with:

# Aging Service Access Point (ASAP) Independent Living Center (ILC) Massachusetts Rehab Comission (MRC) Massachusetts Department of Developmental Services (DDS) Massachusetts Department of Mental Health (DMH)

#### Please select your town or city:



#### www.MassOptions.org

# Questions

