



MassHealth Eligibility Policy Update
Pathway to Short-Term and Long-Term-Care for Family Assistance Members at a Chronic Disease and Rehabilitation Hospital or Nursing Facility
November 2021

Effective November 1, 2021, MassHealth is implementing updated policy guidance to expand coverage for members who are eligible for Family Assistance. Members covered by Family Assistance who require a chronic disease and rehabilitation hospital (CDRH) or nursing facility stay will now have a pathway to become eligible for both an expanded short-term stay (up to six months), or long-term care (LTC). Members may also be able to receive long-term services and supports (LTSS) in the community.

This memo addresses the process by which existing members and new applicants apply for, and if eligible receive, LTC as well as LTSS services in the community.

For more detailed information about the new policy, see [EOM 21-16](#) *Pathway to Short-Term and Long-Term-Care for Family Assistance Members at a Chronic Disease and Rehabilitation Hospital or Nursing Facility*.

Existing Family Assistance Members

1. **Short-term NF/CDRH Stay** (NF/CDRH stay is up to 6 months if single; NF/CDRH stay is up to 30 days if married)
 - **Profile:** Member only requires short-term intervention and is expected to return to community. This applies if member is being admitted to NF/CDRH from another inpatient setting or being admitted from the community. Member meets NF level of care or is approved for continued stay in CDRH.
 - **How to initiate process:** NF/CDRH will notify MassHealth by submitting SC-1 form
 - **MassHealth application to use:** N/A
 - **Necessary steps:**
 - NF/CDRH submits SC-1 form
 - For NF admissions, Level of Care (LOC) form submitted by NF (completed by ASAP)
 - For NF admissions, Preadmission Screening and Resident Review (PASRR) Level I Screening form submitted by referring entity (NF, hospital, or ASAP), and PASRR Level II Evaluation, if applicable

- **Member Impact:** No change to member's Family Assistance benefit

2. Long-term NF/CDRH Stay (NF/CDRH stay is > 6 months or upon clinical determination of LTC need, if single; NF/CDRH stay is > 30 days or upon clinical determination of LTC need, if married)

a. Member is already in a NF/CDRH

- **Profile:** Member meets NF level of care or is approved for continued stay in CDRH and requires long-term care that cannot be provided in the community.
- **How to initiate process:** NF/CDRH will notify MassHealth by submitting SC-1 form
- **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
- **Necessary steps:**
 - NF/CDRH submits SC-1 form
 - For NF admissions, Level of Care (LOC) form submitted by NF (completed by ASAP)
- **Member Impact:** Member's eligibility will be determined for MassHealth Standard using all existing financial/categorical eligibility rules applicable to MassHealth Standard

b. Member is being discharged from an inpatient setting or being admitted from the community

- **Profile:** Member meets NF level of care or is approved for continued stay in CDRH and requires long-term care that cannot be provided in the community.
- **How to initiate process:** NF/CDRH will notify MassHealth by submitting SC-1 form
- **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
- **Necessary steps:**
 - NF/CDRH submits SC-1 form
 - For NF admissions, Level of Care (LOC) form submitted by NF (completed by ASAP)
 - For NF admissions, Preadmission Screening and Resident Review (PASRR) Level I Screening form submitted by referring entity (NF, hospital, or ASAP), and PASRR Level II Evaluation, if applicable
- **Member Impact:** Member's eligibility will be determined for MassHealth Standard using all existing financial/categorical eligibility rules applicable to MassHealth Standard

3. Community LTSS

a. Meets NF level of care

- **Profile:** Member meets NF level of care and requires long-term services and supports that can be provided in the community.
- **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth

- **MassHealth application to use:**
 - Under age 65: use ACA* with appropriate supplements as directed by the MassHealth Enrollment Center
 - Over age 65: use the SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
 - **Necessary steps:**
 - Notice of Clinical Eligibility Determination for State-Funded Community-Based Long-Term Services and Supports form submitted by ASAP to MassHealth Enrollment Center
 - *Disability Supplement submitted for members under 65 only if not Federal or State disabled
 - **Member Impact:** Member's eligibility will be determined for MassHealth Standard/CommonHealth using all existing financial/categorical eligibility rules applicable to such eligibility categories
- b. Does not meet NF level of care, but needs home health/PCA, etc. services
- **Profile:** Member does not meet NF level of care and requires additional services and supports that can be provided in the community. Member is **65 or older** and eligible for Family Assistance.
 - **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth
 - **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
 - **Additional MassHealth form:** PCA Supplement with income greater than 100% FPL but less than or equal to 133% FPL
 - **Member Impact:** Member's eligibility will be determined for MassHealth Standard using all existing financial/categorical eligibility rules applicable to MassHealth Standard
- c. Does not meet NF level of care, but needs home health/PCA, etc. services
- **Profile:** Member does not meet NF level of care and requires additional services and supports that can be provided in the community. Member is **under 65** and eligible for Family Assistance.
 - **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth
 - **MassHealth application to use:** ACA with appropriate supplements as directed by the MassHealth Enrollment Center
 - **Additional MassHealth form:** Disability Supplement submitted if not Federal or State disabled
 - **Member Impact:** Member's eligibility will be determined for MassHealth Standard with income less than or equal to 133% FPL or CommonHealth with income greater than 133% FPL using all existing financial/categorical eligibility rules applicable to such eligibility categories.

New Applicant

1. Short-term NF/CDRH Stay (NF/CDRH stay is up to 6 months if single; NF/CDRH stay is up to 30 days if married)

- **Profile:** Member only requires short-term intervention and is expected to return to community. This applies if member is being admitted to NF/CDRH from another inpatient setting or being admitted from the community. Member meets NF level of care or is approved for continued stay in CDRH.
- **How to initiate process:** NF/CDRH will notify MassHealth by submitting SC-1 form
- **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
- **Necessary steps:**
 - NF/CDRH submits SC-1 form
 - For NF admissions, Level of Care (LOC) form submitted by NF (completed by ASAP)
 - For NF admissions, Preadmission Screening and Resident Review (PASRR) Level I Screening form submitted by referring entity (NF, hospital, or ASAP), and PASRR Level II Evaluation, if applicable
- **Member Impact:** Member's eligibility will be determined for MassHealth Standard using all existing financial/categorical eligibility rules applicable to MassHealth Standard.

4. Long-term NF/CDRH Stay (NF/CDRH stay is > 6 months or upon clinical determination of LTC need, if single; NF/CDRH stay is > 30 days or upon clinical determination of LTC need, if married). This applies if member is already in a NF/CDRH or if member is being discharged from an inpatient setting or being admitted from the community.

- **Profile:** Member meets NF level of care or is approved for continued stay in CDRH and requires long-term care that cannot be provided in the community.
- **How to initiate process:** NF/CDRH will notify MassHealth by submitting SC-1 form
- **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
- **Necessary steps:**
 - NF/CDRH submits SC-1 form
 - For NF admissions, Level of Care (LOC) form submitted by NF (completed by ASAP)
 - For NF admissions, Preadmission Screening and Resident Review (PASRR) Level I Screening form submitted by referring entity (NF, hospital, or ASAP), and PASRR Level II Evaluation, if applicable
- **Member Impact:** Member's eligibility will be determined for MassHealth Standard using all existing financial/categorical eligibility rules applicable to MassHealth Standard.

5. Community LTSS

- a. Meets NF level of care

- **Profile:** Member meets NF level of care and requires long-term services and supports that can be met in the community.
 - **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth
 - **MassHealth application to use:**
 - Under age 65: use ACA* with appropriate supplements as directed by the MassHealth Enrollment Center
 - Over age 65: use the SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center
 - **Necessary steps:**
 - Notice of Clinical Eligibility Determination for State-Funded Community-Based Long-Term Services and Supports form submitted by ASAP to MassHealth Enrollment Center
 - *Disability Supplement submitted for members under 65 only if not Federal or State disabled
 - **Member Impact:** Member's eligibility will be determined for MassHealth Standard/CommonHealth using all existing financial/categorical eligibility rules applicable to such eligibility categories
- b. Does not meet NF level of care, but needs home health/PCA, etc. services
- **Profile:** Member does not meet NF level of care and requires additional services and supports that can be met in the community. Member is **over 65** and eligible for Family Assistance.
 - **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth
 - **MassHealth application to use:** SACA-2 with appropriate supplements as directed by the MassHealth Enrollment Center.
 - **Additional MassHealth form:** PCA Supplement with income greater than 100% FPL and less than or equal to 133% FPL.
 - **Member Impact:** Member will be determined for Medicaid or state-funded Standard/CommonHealth using all existing financial/categorical eligibility rules applicable to such eligibility categories.
- c. Does not meet NF level of care, but needs home health/PCA, etc. services
- **Profile:** Member does not meet NF level of care and requires additional services and supports that can be met in the community. Member is **under 65** and eligible for Family Assistance.
 - **How to initiate process:** Applicant, Authorized Representative, or Provider submits application to MassHealth.
 - **MassHealth application to use:** ACA with appropriate supplements as directed by the MassHealth Enrollment Center.
 - **Additional MassHealth form:** Disability Supplement if not Federal or State disabled
 - **Member Impact:** Member's eligibility will be determined for MassHealth Standard with income less than or equal to 133% FPL or CommonHealth with income greater than 133% FPL using all existing financial/categorical eligibility rules applicable to such eligibility categories.

Important Note: This policy does not provide an option for community LTSS benefits under the Home and Community Based Waiver program. Individuals can only receive LTSS services as referenced in 130 CMR 450.105 (A) and (E).