

Appendix A. LIFE Eligibility and Enrollment Process

Intake

Intake begins when you, or someone on your behalf, contacts the LIFE Provider or the Independent Enrollment Broker expressing interest in services. If it appears from this first conversation that you are potentially eligible, a LIFE Provider and Independent Enrollment Broker representative will contact you to explain the program, obtain further information about you, and to schedule in person or tele-visits. During these visits:

- You will learn how the LIFE Program works, the services LIFE offers, and the answers to any questions you may have about LIFE.
- The LIFE Provider and/or Independent Enrollment Broker will explain that if you enroll, you must agree that all of your healthcare services will be provided and/or coordinated by LIFE, including primary care and specialist physician services (other than emergency services).
- The LIFE Provider will have you sign a release allowing the LIFE Provider to obtain your past medical records so the LIFE health team can fully assess your health conditions.

You will be encouraged to visit the LIFE Center to see what it is like. If you are interested in enrolling, a LIFE Provider representative and the Independent Enrollment Broker will assist you with the enrollment process. You should be prepared to participate in phone calls and/or visits with both the LIFE Provider and Independent Enrollment Broker in order to complete your enrollment process.

Assessment

The LIFE health team will meet with you to evaluate your needs and goals. After the assessment has been completed, the LIFE health team will meet to specifically discuss your evaluation and determine if your needs can be appropriately met by the LIFE program, safely in your home and community. If so, the LIFE health team will develop an individual plan for services and schedule time with you to explain how it can best meet your needs and preferences. However, your LIFE Provider cannot guarantee or offer enrollment before a formal medical eligibility determination has been made.

Determination of Clinical Eligibility

Because LIFE is committed to serving only adults 55 and over who need long-term care and are eligible for nursing home care, you must clinically

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qualify for LIFE Program services. The Department's contracted vendor and your physician will determine your clinical eligibility for the program after making an assessment of your needs.

Determination of Medical Assistance Financial Eligibility

Medical Assistance can provide financial help to pay for LIFE program costs. The County Assistance Office (CAO) will determine your financial eligibility for the Medical Assistance program. To apply for Medical Assistance an application for you must be submitted to the CAO or applied for online at www.compass.state.pa.us. The CAO will request proof of all of your gross income and resources (bank accounts, cash on hand, certificates of deposit, stocks, life insurance policies, investments, vehicles, real estate, etc.) owned by you, and if married, your spouses. The CAO will verify you applied for and received all income and resources you are entitled to. The CAO will also ask for proof of any income or resources transferred or given away in the last 60 months (5 years). The CAO is required to make sure you received monies equal to the known value of the real or personal property transferred, this is known as fair market value.

Transfers include gifts of money, vehicles, or real estate to person(s) other than a spouse. Transfers also include real estate sales, cashed out or closed financial accounts, and any ownership changes to investments, life insurance or other property. ***Any transfer the CAO determines did not receive fair market value could result in a penalty period. During a penalty period you may have to pay privately for your LIFE services.***

It is your responsibility to notify the CAO and your LIFE social worker within 10 days of any changes in your income and resources. The CAO must redetermine your financial eligibility during any change in circumstances that affects your income or resources. This includes any transfers while you are eligible for Medical Assistance. If your income or resources are over the limits it could end your Medical Assistance eligibility. However, the CAO should discuss options with you that may maintain your Medical Assistance. You should also discuss your LIFE enrollment with your LIFE Provider.

If you are eligible for Medical Assistance, you must keep your resources under the current maximum resource limit as determined by the Department to ensure continued eligibility. You will also be required to complete an annual renewal of your financial eligibility for Medical Assistance. Your LIFE Provider can help you complete this process.

If you are eligible for Medicare, you will continue to be responsible for

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maintaining your monthly Medicare Part B premium to the Social Security Administration (SSA) unless the CAO determines you are eligible for Medical Assistance to pay for it.

If you enter a nursing facility and are eligible for Medical Assistance, you may need to make a monthly payment towards the stay, called a cost of care. If your stay is 30 days or less, your LIFE provider will be responsible for all costs. If you are in a nursing facility 31 or more days, the LIFE provider reports this to the CAO. The CAO will calculate the amount of your cost of care and when it begins. The monthly cost of care is paid to the LIFE provider who will pay the nursing facility. The CAO will adjust your cost of care in response to changes in your gross income or eligibility (MA or Medicare). The amount will be adjusted as the figures used to calculate the cost of care (published by the Department) change. You, anyone you request, the nursing facility, and the LIFE Provider will receive notice from the CAO when your cost of care begins and anytime your payment changes.

Note: *Please contact the CAO with any questions you might have regarding your Medical Assistance eligibility or your payment toward cost of care.*

You are responsible to provide true, correct, and complete income and resource information to the CAO to the best of your ability and to provide documentation to verify the reported income and resources. If you cannot get or provide the needed documentation, you should ask the CAO or LIFE social worker for help.

The Department operates a fraud program under which local, state, and federal officials may verify the information you have given. Any unreported income or resources may be determined as fraud after it is reviewed. The fraud program also may determine misuse of participant's income and/or resources by others as fraud or abuse.