
CHAPTER 9: ADULT DAY HEALTH CARE WAIVER

SECTION 9.2: RECIPIENT REQUIREMENTS**PAGE(S) 3**

RECIPIENT REQUIREMENTS

The Adult Day Health Care (ADHC) Waiver program is only available to individuals who meet all the following criteria:

- Medicaid financial eligibility,
- Age 65 years or older, **OR** 22 through 64 years of age with a physical disability that meets Medicaid standards or the social Security Administration's disability criteria,
- Nursing facility level of care requirements,
- Name on the Request for Services Registry for the ADHC Waiver, and
- A Plan of Care sufficient to:
 - Assure the health and welfare of the waiver applicant in order to be approved for waiver participation or continued participation, and
 - Justify that the ADHC Waiver services are appropriate, cost effective and represent the least restrictive environment for the individual.

ADHC Waiver recipients must attend a minimum of 36 days per calendar quarter, absent extenuating circumstances. The assigned support coordinator, based upon guidance provided by OAAS, must approve exceptions for extenuating circumstances.

NOTE: An individual may only be certified to receive services from one home and community-based waiver at a time.

Request for Services Registry

The Department of Health and Hospitals (DHH) is responsible for the Request for Services Registry (RFSR), hereafter referred to as "the registry," for the ADHC Waiver. An individual who wishes to have his or her name placed on the registry shall contact a toll-free telephone number which is maintained by the Office of Aging and Adult Services (OAAS).

Individuals will be screened to determine whether they meet nursing facility level of care. Only individuals who meet this criterion will be added to the registry. The individual's name is placed on the registry in request date order.

ADHC Waiver opportunities shall be offered to individuals on the registry according to priority

CHAPTER 9: ADULT DAY HEALTH CARE WAIVER

SECTION 9.2: RECIPIENT REQUIREMENTS**PAGE(S) 3**

groups. The following groups shall have priority for ADHC Waiver opportunities in the order listed:

- Individuals with substantiated cases of abuse or neglect with Adult Protective Services (APS) or Elderly Protective Services (EPS) and who, absent ADHC Waiver services would require institutional placement to prevent further abuse and neglect,
- Individuals who have been discharged after a hospitalization within the past 30 days that involved a stay of at least one night,
- Individuals admitted to a nursing facility who are approved for a stay of more than 90 days; and
- All other eligible individuals on the RFSR, by date of first request for services.

If an applicant is determined to be ineligible for any reason at the time an offer is made, the next individual on the registry, based on the above stated priority group, is notified and the process continues until an individual is determined eligible. An ADHC Waiver opportunity is assigned to an individual when eligibility is established and the individual is certified.

Admission Denial or Discharge Criteria

Failure of the individual to cooperate in the eligibility determination process or to meet any of the following criteria will result in denial of admission to/discharge from the ADHC Waiver:

- The individual does not meet the criteria for Medicaid financial eligibility,
- The individual does not meet the criteria for a nursing facility level of care,
- The recipient resides in another state or has a change of residence to another state,
- Continuity of services is interrupted as a result of the recipient not receiving and/or refusing ADHC Waiver services (exclusive of support coordination services) for a period of 30 consecutive days,

Note: Continuity of services will not apply when interruptions are due to a recipient being admitted to a rehabilitation hospital or nursing facility so long as the stay does not exceed 90 consecutive days.

- The health and welfare of the individual cannot be reasonably assured through the

CHAPTER 9: ADULT DAY HEALTH CARE WAIVER

SECTION 9.2: RECIPIENT REQUIREMENTS**PAGE(S) 3**

provision of the ADHC Waiver services within the individual's cost effectiveness,

- The individual fails to cooperate in the eligibility determination process or in the performance of the Plan of Care,
- It is not cost effective to serve the individual in the ADHC Waiver,
- The recipient fails to attend the ADHC center for a minimum of 36 days per calendar quarter, or
- The recipient fails to maintain a safe home environment.

Involuntary discharge/transfer from the waiver may occur for one of the following:

- Medical protection or the well-being of the individual or others,
- Emergency situation (i.e., fire or weather related damage),
- Health or welfare of the recipient is threatened, or
- An inability of the ADHC provider to furnish the services indicated in the recipient's Plan of Care after documented reasonable accommodations have failed.