

Waiver While Waiting

The Department of Vermont Health Access (DVHA) and the Department of Disabilities, Aging and Independent Living (DAIL) use a tool, called Waiver While Waiting (WWW), to screen an individual for temporary eligibility for Long-Term Care (LTC) Medicaid under the Choices for Care waiver program (CFC) while DVHA completes the individual's CFC financial eligibility determination.

All individuals applying for CFC are screened by DVHA for WWW eligibility. This applies to all settings: Home Based Waiver (HBW), Adult Family Care home (AFC), Enhanced Residential Care home (ERC) and Nursing Facility (NF).

To be eligible for WWW, an applicant must meet all of the following criteria:

- DAIL has determined that the applicant is clinically eligible for CFC, AND
- For HBW/AFC, the applicant has picked the highest paid provider, OR for ERC/NF, the applicant has been placed in the facility, AND
- The applicant meets one of the following:

CFC applicant **without** a community spouse

- Received SSI, 3SquaresVT, or Medicaid during the past 12 months;
- During the interview with DVHA reports no asset transfers during the 5-year look back period (LBP);
- Has gross income, minus a \$20 unearned disregard, below Medicaid's Protected Income Level (PIL); and
- Self-attests to having countable resources below the allowable maximum:
 - \$5,000 for a HBW applicant with an ownership interest in the home they reside in
 - \$2,000 for all others

CFC applicant **with** a community spouse:

- Received SSI, 3SquaresVT, or Medicaid during the past 12 months;
- During the interview with DVHA reports no transfers during the 5-year LBP;
- Has combined gross income, minus a \$20 unearned disregard, below the PIL or the SSI standard for a couple; and
- Self-attests to combined countable resources of less than \$50,000.

CFC applicant active on Medicaid for Children and Adults (**MCA**):

- During the interview with DVHA reports no transfers during the 5-year LBP.

If a CFC applicant meets the WWW criteria, DVHA and DAIL will temporarily grant LTC Medicaid eligibility so payment for LTC services can begin. A notice of decision will be mailed to the applicant which will include the amount the applicant must pay towards the cost of their LTC services (patient share) while DVHA continues to process the applicant's CFC financial application. The amount of an applicant's patient share may be zero.

Temporary eligibility for LTC Medicaid under the WWW screening tool will end upon the first to occur of the following:

- The applicant is found eligible for CFC;
- The applicant is found ineligible for CFC; or
- The applicant fails to cooperate with the CFC application process.