

PDS VERSION 2 BASICS

- Patient Liability amounts can go as high as \$325 per month for any participant that gets a new LOC 9/15/16 and forward
- Service Advisors are not on call 24/7 but do have to provide access to assistance and information 24/7
- **Home and Community Supports:**
 - Cannot exceed \$11.52 gross per hour
 - Cannot exceed 45 hours per week (Sun-Sat)
 - A single employee cannot exceed 40 hours per week (Sun-Sat)
 - Cannot exceed \$200 per day alone or in combination with ADHC services
 - Does not include travel time to client's home
- **Home and Community Supports include the following duties:**
 - Cleaning
 - Cooking
 - Chores
 - Bathing
 - Grooming
 - Dressing
 - Eating
 - Toileting
 - Transferring
 - Assisting with self-administered meds
 - Transporting participant to a needed place as outlined in the POC to grocery, pharmacy, and/or appointment – Valid Driver's License, Proof of Insurance, and Registration required to be in participant's file
- **Non-Specialized Respite:**
 - Cannot be used to relieve a paid employee even if that paid employee is the primary caregiver
 - Cannot exceed \$11.00 gross per hour
 - Cannot exceed \$4000 per year alone or in combination with Specialized Respite
 - Cannot exceed \$200 per day alone or in combination with Specialized Respite
- **Non-Specialized Respite includes the following duties:**
 - Supervision for a participant who has care needs beyond normal baby sitting or care sitting
 - To relieve non-paid primary caregiver
- **Minor Home Adaptations:**
 - Client must own the home or the legal guardian must own the home
 - Not to exceed \$2500 per LOC year
 - Must be performed by a licensed and insured contractor
 - Must adhere to regulatory building codes
- **G&S:**
 - Not to exceed \$3500 per LOC year
 - No longer need an RX for basic (depends, gloves, wipes, Ensure) – However diagnosis relating to need must be listed on MAP 10
 - Will require a letter of medical necessity for items such as shower chairs, grab bars, lift chairs, etc.



COMMONWEALTH OF KENTUCKY
Cabinet for Health and Family Services
Department for Medicaid Services
MEDICAID ESTATE RECOVERY
FACT SHEET

WHAT IS MEDICAID ESTATE RECOVERY?

When a person who received Nursing Home or Waiver Services dies, Medicaid will ask the estate to pay back some or all of the amounts paid, on behalf of the deceased, for services.

WHO WILL BE ASKED TO REPAY?

A person who is age 55 or older and has received Nursing Facility Services, Intermediate Care Facility for the Mentally Retarded and Developmentally Disabled Services, Home and Community Based Services, Supports for Community Living, Michelle P. Waiver, Acquired Brain Injury, Acquired Brain Injury Long Term Care Waiver;

or

A person who has received Nursing Facility Services or Intermediate Care Facility for the Mentally Retarded and Developmentally Disabled Services for 6 months.

WHEN DOES ESTATE RECOVERY START?

Upon the person's death the Department for Medicaid Services will send a notice to the estate representative of the intent to recover.

WHO MAY NOT HAVE TO REPAY?

1. Estate recovery is not done:
 - If the deceased person has a surviving spouse; or
 - If the deceased person has a surviving child under age 21; or
 - There is a blind or disabled child as defined in §1614 of the Social Security Act.
2. Estate recovery is not done when there is a hardship reason. A hardship reason is:
 - The estate is the only source of income for the remaining family members. Hardship reasons may be appealed.
3. Other reasons for not pursuing estate recovery are:
 - The total assessed value is \$10,000 dollars or less
 - A surviving family member has continuing education needs;
 - A surviving family has medical needs;
 - If recovery is not cost effective.

HOW DO YOU ASK NOT TO REPAY?

- The estate representative has to write a letter to the Department and send documentation as to why they should not have to repay.
- The Department will respond in writing to the request.

HOW YOU CAN FIND OUT MORE?

You can get more information on Medicaid Estate Recovery by contacting any county office of the Department for Community Based Services or by writing to:

Department for Medicaid Services
Division of Program Integrity
Third Party Liability Branch
275 East Main Street, 6E-A
Frankfort, Kentucky 40621