

469-000-327 PROCEDURES FOR ASSISTED LIVING AND ASSISTED LIVING WAIVER SERVICES

**POINTS TO REMEMBER ABOUT ASSISTED LIVING AND ASSISTED LIVING WAIVER SERVICES**

There is no Medicare certification for Assisted Living Waiver Services, so the SON will change the first full month of authorized Waiver services.

Always use the highest appropriate SON for the month of entry into Assisted Living.

There is no remedial care allowance for Assisted Living Waiver, only Assisted Living.

The client must be Waiver eligible (need nursing home level of care) and have an Aged and Disabled Waiver case established on N-FOCUS to be Assisted Living Waiver.

The SON for Assisted Living, as well as Assisted Living Waiver, includes the personal needs allowance (469-000-211). To arrive at the actual room and board payment, the client would pay the facility, you need to subtract the Personal Needs Allowance from the total SON.

Deprivation of resource rules do apply to Assisted Living Waiver, but not to Assisted Living except for grant.

Both Assisted Living and Assisted Living Waiver budgets get the \$20 disregard.

The begin date for Waiver is the date payment for waiver services begins. This date is not necessarily the same as the Waiver assessment date.

If both spouses are in Assisted Living and only one needs Waiver services, the other spouse may be a community spouse.

See 469-000-338 for spousal procedures when there is Waiver at home.

For N-FOCUS budgeting steps for Assisted Living and Assisted Living with Waiver, see "how to help."