

### **477-000-042 – SIMP Procedures for AD Waiver at Home**

Effective January 11, 2016, a spousal assessment may be completed when it is likely that 30 days of nursing level of care is necessary for an individual either in the home (e.g. HCBS Waiver or PACE) or in a medical institution. The alternate care spouse may receive HCBS waiver or PACE when a couple has spent down the community spouse's reserved amount plus \$4,000 or they have the minimum reserved amount or less.

- The completion of a home and community-based waiver or PACE assessment (when level of care met) now meets the criteria for the likely 30 day period

OR

- If the institutionalized individual has not already met the 30 day continuous stay, the facility may declare that the stay is likely to be at least 30 days.

SIMP budgeting cannot begin in any month that the non-waiver spouse was Medicaid eligible. This includes in spend down status with a SOC form.

A disabled or aged spouse cannot choose to be ineligible until one spouse has met the 30-day requirement for Spousal (either facility or at home waiver or PACE).

Setting a Waiver or PACE client to active status means you have obligated any SOC to the waiver services billing.

#### **Examples:**

##### **Both members of the couple are Medicaid eligible and one spouse is requesting HCBS Waiver or PACE services:**

One spouse has met the likely 30 day period, an Assessment of Resources (IM-73) has been completed, and the other spouse is requesting to no longer have Medicaid eligibility in order to receive SIMP.

1. Current resources must be no more than the IM-73 reserved amount + \$4,000.
2. If the non-waiver spouse is no longer eligible for Medicaid, complete the IM-74 and begin spousal (SIMP) budgeting with the month that HCBS Waiver or PACE services actually begin. (SIMP budgeting should not begin until the spouse not receiving the HCBS Waiver or PACE is closed and are set as the community spouse.)
3. Do not open the Medicaid SIMP case and use SIMP until you know what month Waiver or PACE is activated. Waiver or PACE and Medicaid need to coordinate this.

##### **One Spouse is requesting Medicaid and HCBS Waiver or PACE:**

One spouse has met the likely 30 day period, an Assessment of Resources (IM-73) has been completed, and one spouse is now applying for AD Waiver or PACE at home:

- a. Current resources must be no more than the IM-73 reserved amount + \$4,000.
- b. Complete the IM-74 and begin spousal (SIMP) budgeting with the month that HCBS Waiver or PACE services actually begin.
- c. Do not open the Medicaid SIMP case and use SIMP until you know what month HCBS Waiver or PACE is activated. HCBS Waiver or PACE and Medicaid need to coordinate this.