

ADMINISTRATIVE RULES SUMMARY

TO: Medical Care Advisory Committee

FROM: Dawn I. Landry, OMBP Medicaid Eligibility Policy Specialist

DATE: 10.28.2016

RE: Expiring Rules Related to Financial Eligibility for the Adult Categories of Medical Assistance When Residing in Residential Care Facilities and Community Residences

Status: The attached rules are scheduled to expire on 2/1/2017, but is subject to extension pursuant to RSA 541-A:14-a. Because the Department's Medicaid policy remains unchanged the Department is requesting the rules be placed on the 11/15/2016 "consent agenda".

1. Target Dates.

Rule to MCAC via email: 10/28/2016

Rule presented to MCAC: N/A

Earliest Date for Public hearing: 12/15/2016

MCAC deadline to request presentation: N/A

Earliest Date RNF published: 11/23/2016

JLCAR: 01/20/2017

3. Rule Summary:

Reason for rulemaking (e.g., expiration, statutory change, policy change). The Department is proposing to adopt the policy related to Medical assistance currently found in He-W 648.02 and He-W 648.03, into Chapter He-W 800, the chapter where all rules associated with medical assistance are now located, as He-W 848.02 and He-W 848.03.

Description of the specific changes being proposed to the rule: Proposed He-W 848.02 describes the eligibility requirements for the adult categories of medical assistance for individuals residing in Residential Care Facilities. The Department is proposing to delete reference to 'financial assistance' in paragraph (a) and delete paragraph (d) because these requirements will be readopted under the He-W 600s, the Chapter where all the rules associated with eligibility for the financial assistance programs are located.

Proposed He-W 848.03 describes the eligibility requirements for the adult categories of medical assistance for individuals residing in Community Residences. The Department is proposing to delete reference to 'financial assistance' in paragraph (a) and delete paragraph (d) because these requirements will be readopted under the He-W 600s, the Chapter where all the rules associated with eligibility for the financial assistance programs are located. In addition, the Department is also proposing to update citations related to the definition of 'community residences' and 'family residences' to better align with the definitions created by the Division of Community Based Care Services.

Description of any fiscal impact to recipients, providers, or the State of New Hampshire.

There is no anticipated cost associated with the adoption and renumbering of these rules.

4. Issues of Concern: There are no issues of concern.

5. Department Contacts:

- Dawn I. Landry, Medicaid Eligibility Specialist, 271-9315, dilandry@dhhs.nh.gov
- Catherine Bernhard, Rules Coordinator, 271-9274, Catherine.Bernhard@dhhs.nh.gov

Please send all comments (including specific language changes) to: Dawn I. Landry, dilandry@dhhs.nh.gov

CHAPTER He-W 800 ELIGIBILITY FOR MEDICAL ASSISTANCE

PART He-W ~~68~~48 RESIDENTIAL CARE FACILITIES AND COMMUNITY RESIDENCES

Readopt with amendment and renumber He-W 648.02, effective 02-01-09 (Document # 9364), as He-W 848.02, so that He-W 848.02 is cited and reads as follows:

He-W ~~68~~48.02 Residential Care Facilities.

(a) Individuals living in residential care facilities, as described in RSA 151:2, I(e), shall meet all general, technical, categorical, and financial requirements for adult category ~~financial and~~ medical assistance, in addition to the requirements below.

(b) Individuals living in residential care facilities shall be entitled to a different standard of need than individuals residing in independent living arrangements when the residential care facility is licensed by the department as meeting the standards for the care of residential care facility residents.

(c) Financial eligibility for individuals in residential care facilities shall be determined as an assistance group size of one.

~~(d) If an individual is determined eligible, financial assistance shall be provided directly to the individual, not to the operator of the residential care facility.~~

~~(d)~~ (de) The standard of need for an individual in a residential care facility shall be adjusted annually as specified in He-W 648.04.

Readopt with amendment and renumber He-W 648.03, effective 02-01-09 (Document # 9364), as He-W 848.03, so that He-W 848.03 is cited and reads as follows:

He-W ~~68~~48.03 Community Residences.

(a) Individuals living in community residences, as defined in He-~~M 1001.02(k)W-601.02(r)~~, shall meet all general, technical, categorical, and financial requirements for adult category ~~financial and~~ medical assistance, in addition to the requirements below.

(b) Individuals living in community residences shall be entitled to a different standard of need than individuals residing in independent living arrangements when:

(1) The community residence is certified or licensed by the department;

(2) The individual has been determined appropriate for community residence care by a division of developmental services area agency case manager; and

(3) The individual has been placed in a community residence.

(c) Financial eligibility for individuals in community residences shall be determined as an assistance group size of one.

~~——(d) If an individual is determined eligible, financial assistance shall be provided directly to the individual, not to the operator of the community residence.~~

(de) The standard of need shall be adjusted annually, as specified in He-W 648.04, for individuals living in a:

- (1) Community residences, as defined in He-~~M 1001.02(k)~~~~W 601.02(r)~~; and
- (2) Family residences, as defined in He-M 1001.02(k) and He-M 1001.02(~~p~~~~o~~).

Appendix

He-W 648.02	RSA 167:3-c, II-b; RSA 167:7, I-a; RSA 167:27-c, Section 1618 of the Social Security Act [42 USC 1382g]
He-W 648.03	RSA 167:3-c, II-b; RSA 167:7, I-a; RSA 167:27-c, Section 1618 of the Social Security Act [42 USC 1382g]