

# **State/County Special Assistance Program**

Presentation to Adult Care Transition Sub-Committee of  
the Blue Ribbon Commission

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# State/County Special Assistance (SA) Adult Care Home (ACH) Program

G.S. 108A-40

- Provides a cash payment to supplement a person's own income to live in certain licensed facilities.
- Licensed facilities include:
  - Adult care homes and family care homes licensed under G.S. 131D, and
  - Supervised living facilities licensed under G.S. 122C and 10A NCAC 27G .5600 A and C
- SA covers a range of expenditures that are not related to personal care services (PCS). Among those expenditures are salaries and fringe for non-PCS staff, housekeeping, food, supplies, depreciation or rent, repairs, insurance, equipment, linens, beauty and barbershop. Basically SA covers other expenditures incurred by a facility, but not PCS. Medication administration is not covered by SA.

# SA In-Home Program

- Provides cash payment to address identified needs for individuals who can and desire to live safely at home.
- Identified needs can include: rent, utilities, and repairs; food and nutritional supplements; ramps and grab bars; clothing; Medicaid co-pays; over the counter meds; incontinence supplies; personal assistance in the home; respite services to relieve informal caregivers.
- Identified needs are determined based on a comprehensive assessment conducted by a DSS case manager.

# SA Budget

- Total SA expenditures for SFY 11-12:  
\$140,938,034
  - ACH: \$131,072,372 (93%)
  - SA/IH: \$9,865,662 (7%)
- Certified Budget for SFY 11-12 and 12-13  
\$140,427,088
- Payments to recipients are 50% state and 50% county funds

# How Do Counties Pay for the Administrative Costs Related to SA/IH?

- Most DSSs use a Medicaid targeted case management program for case management activities.
- DSSs are responsible for the 36% non-federal share for the Medicaid targeted case management program.
- Social Services Block Grant (SSBG) funds can also be used for SA/IH case management.
- DSSs are responsible for the 25% non-federal share for SSBG funds.
- Administrative costs for determining initial and ongoing eligibility for SA-ACH and SA/IH benefits are 100% county funds (budgeted at \$5,600,000 for FY 12-13).

# Special Assistance Active Cases by Setting November 2012

SETTING	ACTIVE CASES	PERCENTAGE OF ACTIVE CASES
Adult Care Home	13,098	52%
Family Care Home	2,346	9%
Special Care Unit	3,092	12%
Supervised Living/ Group Home Mental Health	2,085	8%
Supervised Living/Group Home IDD	2,427	10%
Special Assistance In-Home	2,396	9%*
<b>TOTAL</b>	<b>25,444</b>	

\*percentage cannot exceed 15%.

# SA Rates

- SA maximum rates and recipient personal needs allowance established by General Assembly [SL 2012-142, Section 23(g)]
  - Basic rate \$1,182/month
  - Special care unit rate \$1,515/month
  - Personal needs allowance \$46/month

# How SA Payment is Determined

- SA payment is based on a person's total countable monthly income
- SA payment supplements the person's income up to \$1,182 (basic) or \$1,515 (special care unit)
- Personal needs allowance of \$46 is added to this payment
- Example:
  - $\$1,182$  (SA basic rate) +  $\$46$  =  $\$1,228$  -  $\$700$  (monthly income) =  $\$528$  SA payment



# SA Eligibility

Must:

- Meet certain income thresholds
- Meet resource (assets) limit of \$2,000
- Be a U.S. citizen or qualified alien
- Meet State residency requirements

# Eligibility

- Have physician documentation (FL-2) indicating need for ACH level of care; and
- Be 65 years of age or older, or if age 18-64, must meet Social Security definition for disability or legally blind
- Eligibility determination is a responsibility of county departments of social services

# SA-ACH and SA/IH Medicaid Eligibility

## ➤ SA-ACH

- SSI is a federal entitlement program.
- NC's SA-ACH is an Optional State Supplement to the SSI Program and as such, eligible recipients are automatically eligible for Medicaid.
- Medicaid is automatic in NC for SSI recipients under an agreement with the Social Security Administration (Social Security Act, Section 1634.)
- The SA-ACH benefit must be made available to all who qualify statewide, i.e., an entitlement.

## ➤ SA/IH

- SA/IH established by the NC General Assembly as codified in NC General Statutes.
- SA/IH not part of NC's Optional State Supplement Program.
- Therefore, must first qualify for full private living Medicaid.

# Non-Qualifying for Personal Care Services (PCS)

- Approximately 27% of all SA recipients in licensed facilities have income above the federal poverty level and will not qualify for Medicaid in a private living setting.
- Of the estimated 9,322 individuals who may be discharged from licensed facilities because they don't qualify for PCS, approximately 2,500-2,900 will not qualify for Medicaid and SA/IH.

# Implementation of Optional State Supplement (OSS) Program Payments in Other States

States reporting payment amounts for January 2011 (latest SSA publication):

- Six states provide supplements only to individuals in private living settings.
- Sixteen states provide supplements only to individuals in residential care settings (NC is in this number).
- Twenty-two states provide supplements to individuals in both residential care settings and private living settings.
  - Seventeen of these twenty-two states have significantly higher payments for individuals in residential care settings.
- Six states do not participate in the OSS program.

## States with Higher OSS Payments for Residential Care than for Private Living

	State Supplement Payment Range	
State	Private Living Setting	Residential Care Setting
Colorado	\$25-\$475	\$551
Idaho	\$52	\$198-\$473
Kentucky	\$62	\$172-\$520
Maine	\$8-\$10	\$217-\$234
Massachusetts	\$30-\$374	\$149-\$454
Michigan	\$9-\$14	\$157-\$179
Minnesota	\$81-\$112	\$261
Nebraska	\$5	\$128-438
Nevada	\$36-\$213	\$391
New Hampshire	\$27-\$149	\$207
New Jersey	\$25-\$153	\$150-\$210
New York	\$23-\$87	\$228-\$644
Pennsylvania	\$22-\$43	\$434-\$439
Rhode Island	\$40-\$52	\$388-\$538
South Dakota	\$15	\$765
Vermont	\$39-\$52	\$98-\$223
Wisconsin	\$84-\$135	\$180

# CHANGES TO SA/IH SL 2012-142, Section 10.23

- Equalizes SA/IH payments with SA payments for persons living in adult care facilities (previously 75% for SA/IH payments; effective July 1, 2012 payments 100%).
- Requires DHHS to establish formula for statewide slot allocation.
- Allows DHHS Secretary to waive 15% statewide cap (currently 3,817 slots) for SA/IH slots effective February 15, 2013.

# CHANGES IN SA/IH SL 2012-142, Section 10.23

- Requires county department of social services participation (DSS) in SA/IH Program
  - Participating DSSs with unfilled slots effective February 15, 2013, must maintain at a minimum, the average number of filled slots during SFY 2011-2012.
  - DSSs with assigned slots and no filled slots must begin participating effective February 15, 2013, by filling all the their assigned slots.
  - DSSs with no established slots must begin participating effective February 15, 2013. The Division of Aging and Adult Services has established the slot allocations for these counties.



# QUESTIONS

