

# Eligibility

## CONNECTICUT HOME CARE PROGRAM FOR ELDERERS

Effective January 1, 2018

<u>Category Type</u>	<u>Description</u>	<u>Functional Need</u>	<u>Financial Eligibility</u>
<b>Category 1 CHCPE</b>	Limited home care for moderately frail elders	At risk of hospitalization or short-term nursing home placement (1 or 2 critical needs)	Individual Income = No Limit* Assets: Individual = \$37,080 Couple = \$49,440
<b>Category 2 CHCPE</b>	Intermediate home care for very frail elders with some assets above the Medicaid limits.	In need of short or long-term nursing home care (NF LOC)	Individual Income = No Limit* Assets: Individual = \$37,080, Couple = \$49,440
<b>Category 3 CHCPE</b>	Extensive home care for very frail elders who would otherwise be in a nursing home on Medicaid	In need of long-term nursing home care (NF LOC)	Individual Income = \$2,250 Mth. Assets: Individual = \$1,600, Couple: both as clients = \$1,600 each, one as client = \$26,320 (\$1,600 + 24,720 CSPA)**
<b>Category 4 CHCPD</b>	Intermediate home care for individuals under age 65 w/ degenerative neurological condition and not eligible for Medicaid	In need of short or long term nursing home care (NF LOC)	Individual Income = No Limit * Assets: Individual = \$37,080, Couple = \$49,440

<b>Category 5 1915(i)</b>	Same as Category 1. Also active on Categorically needy Medicaid S01, S02,S03,S04. Must be 65 or older	At risk of short or long term nursing home care. (1 or 2 critical needs)	Individual Income: \$1,518 Assets: Individual= \$1,600
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[Click here for printable version of chart above \(pdf\)](#)

**Notes:**

1. Clients in the higher income range are required to contribute to the cost of their care. Applied income starts at \$2,024.00
2. \* There is no income limit for state funded portion of program. The Medicaid Waiver income limit remains at 300% of SSI which is \$2,250.00.
3. CHCPE Services available at all categories include the full range of home health and community based services. 1915(i) state plan option has limited PCA services up to 14 hours a week and homemaking services up to 6 hours a week.
4. Care plan limits at all categories are based on the total cost of all state-administered services.
5. 1915(i) state plan option covers individuals on Medicaid but who qualify for category 1 services. CT will claim 50% reimbursement from federal government for home and community based services not reimbursable under Medicaid.
6. Some individuals under Category 2 may become financially eligible for Medicaid Waiver. In these cases, client must apply for Medicaid and cooperate with application process.
7. \*\* Married Couples who are over this asset limit for category 3 may be eligible based on the special spousal asset protection rule.
8. Functional need is a clinical determination by the Department about the applicant's critical need for assistance in the following areas: Activities of Daily Living (ADL's): Bathing, Dressing, Toileting, Transferring, Eating/Feeding. Needs factors: 1.Behavioral Need - Requires daily supervision to

prevent harm. 2. Medication supports - Requires assistance for administration of physician ordered daily medications. Includes supports beyond set up.

9. NF LOC is defined as;

1. Supervision or cueing  $\geq$  3 ADL's + need factor
2. Hands-on  $\geq$  3 ADL's
3. Hands-on  $\geq$  2 ADL's + need factor
4. A cognitive impairment which requires daily supervision to prevent harm.

10. Subacute LOC is defined as;

1. Participant requires comprehensive medical monitoring but does not require intensive diagnostic and/or invasive procedures
2. Participant requires intense medical supervision and therapy such as nursing intervention intermittently throughout the day and/or the need for ancillary or technological services (such as laboratory, pharmacy, nutrition, diagnostic)
3. Participant may require services such as brain injury rehabilitation, high intensity stroke or orthopedic programs, ventilator programs, complex wound care or specialized infusion therapy.

11. Care Plan limits are for CHCP fee for service only.

12. For contracted Access Agencies use only.

### **CT Homecare Program Eligibility -**

- Aged 65 years and older
- CT Resident
- Functionally Eligible
- Financial Eligibility

## **FUNCTIONAL ELIGIBILITY**

Functional eligibility is determined based on Activities of Daily Living (ADL's or critical needs). These activities are things we normally need

to do to live independently which are: bathing, dressing, toileting, eating/feeding, medication management, and being able to transfer. A client is also assessed for Instrumental Activities of Daily Living (IADL's) which are those activities related to being able to live independently but not crucial to your health such as housework, shopping, laundry, financial management, ability to use the telephone and the ability to travel from your residence, to name a few. These critical needs help to determine the level of service a client would be eligible for in conjunction with the financial level of eligibility.

## **FINANCIAL ELIGIBILITY**

### **Income and Asset Information -**

**Gross Monthly Income** The gross monthly income includes all income received by the applicant on a regular basis like wages, pension, Social Security Income, Veterans Benefits and Supplemental Security Income. The gross monthly income is the total income before any deductions including deductions for Medicare premiums. Count only the applicant's income. If the applicant is married, do not count the spouse's income.

**Income Limits** There is no income limit for individuals who qualify for the state-funded CHCPE. The income limit for the Medicaid Waiver is \$2,199.00.

**Countable Assets** All of the applicant's countable assets must be counted in full. Assets owned by an applicant's spouse must be included in the total countable assets of the applicant. Additionally, assets are considered to be owned by the applicant for any jointly held assets unless it can be shown they are owned by someone else (not a spouse). Examples of countable assets include:

- checking accounts
- savings accounts
- revocable trust funds
- certificates of deposit (CD)
- individual retirement accounts (IRA)
- vacation or Christmas clubs
- stocks
- bonds, including U.S. Savings Bonds
- real estate not used as your primary residence
- non-essential motor vehicles
- boats
- campers
- total cash surrender value of life insurance policies with a total face value that exceeds \$1,500.

**The CHCPE state funded asset limits are:** Individual \$35,776.00  
Couple Combined Assets (One or both receiving services) \$47,688.00

**The CHCPE Medicaid Waiver asset limits are:** Individual \$1,600.00  
Couple with both receiving services \$3,200.00  
Couple with one receiving services: Couple: \$25,444. - \$118,840. (based on spousal impoverishment rules)

\* Under both the CHCPE State-Funded component and the CHCPE Medicaid Waiver Component, additional assets can be kept when a Connecticut Partnership approved Long Term Care Insurance policy has paid for your care. The amount you can protect (keep) is equal to the benefits paid by the policy.

**Please click on the links below to access the applications.**

**[CHCPE On-line Application](#)**

**[Medicaid for Long Term Care Application](#)**

**[Spanish Medicaid LTC application](#)**

**[List of DSS application centers by town](#)**