

**ATTENDANT SERVICES PROGRAM****Frequently Asked Questions** (updated May 13, 2011)

**Question #1:** When someone on long-term care Medicaid (Choices for Care (CFC)) does not pay his/her patient share, is the person eligible to enroll in the General Fund ASP?

Answer: No.

Reason: People are not ineligible for CFC when they do not pay their patient share. They remain eligible for CFC despite non-payment of patient share.

Section 108(f) of the ASP regulations specifies: “an individual shall be required by the Department to apply and be found ineligible for services from other Medicaid-funded personal care or attendant care services programs.” Therefore, despite failure to pay patient share, the person remains “eligible” for CFC and is therefore not permitted to enroll in the General Fund ASP program.

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**Question #2:** When someone is not eligible for community Medicaid because they need to spend their extra resources or income, is the person eligible for General Fund ASP?

Answer: No.

Reason: If an individual is otherwise eligible for community Medicaid but does not meet the “spend down” requirement they are not eligible for

General Fund ASP. The individual has the option to apply their excess resources and spend down to remain on community Medicaid and receive their services under the Medicaid funded portion of Attendant Services Program.

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**Question #3:** If a person is on Medicaid PDAC and has a spend down does their PCA/attendant get paid during that time?

Answer: Yes.

Reason: The PCA would be paid by the individual as part of their spend down requirement. Once that requirement is met and the individual begins to receive community Medicaid, the PCA will automatically be paid by the Fiscal Intermediary (ARIS). ARIS checks with the Medicaid eligibility system as one part of determining who will be paid each pay period.

**Question #4:** Can I just receive my ASP services through Personal Services if I did not meet the Medicaid spend down requirement?

Answer: No.

Reason: Section 105(b) 4 of the Attendant Services Regulations requires that in order to be eligible for services under the Personal Services an individual must either

- a. Be eligible to receive Medicaid or
- b. Be an active participant in Attendant Services Program, have a continued need for attendant services, and be ineligible for other sources of attendant services.

The intent of this program option has been and continues to be for individuals who may have lost the ability to self direct and therefore lose their eligibility for the Participant Directed options.

While the individual may be eligible for Medicaid, Section 108(f) of the Attendant Services Regulations states that "An individual who is eligible for Medicaid-funded personal care or attendant care services shall not be eligible to receive services from the following options paid for by the General Fund: Personal Services, Participant-Directed Attendance Services or group-Directed Attendant Services.