

# Operations Memorandum - Medicaid

## OPS080603

June 13, 2008

**SUBJECT: Adult Autism Waiver**  
**TO: Executive Directors**  
**FROM: Joanne Glover, Director, Bureau of Operations**

### **Purpose**

The purpose of this memorandum is to announce the implementation of the Adult Autism Waiver by the Bureau of Autism Services (BAS), within the Department of Public Welfare (DPW). The procedures for determining eligibility and to introduce waiver code 52 to designate the Adult Autism Waiver are provided in this memorandum. This policy is effective July 1, 2008.

### **Background**

DPW has received approval from the Centers for Medicare and Medicaid Services (CMS) to provide services under a Home and Community Based Services (HCBS) waiver. To qualify for the Adult Autism Waiver, individuals must be 21 years of age or older, diagnosed with Autism Spectrum Disorders (ASD) and meet Medical Assistance (MA) eligibility requirements and level of care requirements. The Adult Autism Waiver has been created to provide specific community-based services and supports needed by adults living with ASD. These services are available on a statewide basis, beginning July 1, 2008. It is anticipated that 200 clients will be enrolled in the Adult Autism Waiver the first year and a total of 500 participants will be enrolled within a period of three years.

### **Discussion**

The Adult Autism Waiver requires a level of care assessment made by the BAS and a determination of eligibility for MA made by the County Assistance Office (CAO). The Adult Autism Waiver will allow a greater number of adults with ASD to receive services by meeting either the Intermediate Care Facility for Persons with Other Related Conditions (ICF/ORC) or Intermediate Care Facility for Persons with Mental Retardation (ICF/MR) level of care.

The ICF/ORC level of care determination will be completed by BAS. The ICF/MR level of care determination will be made by the Office of Developmental Programs (ODP). Administration of the waiver, including enrollment, will be done by BAS.

Although the Adult Autism Waiver is a new HCBS waiver, there should be minimal impact on the CAOs. Policy regarding financial and non-financial eligibility is the same as other HCBS waivers already in existence.

### **SERVICES PROVIDED UNDER THE ADULT AUTISM WAIVER**

- Case management (supports coordination)
- Respite care
- Residential and Day Habilitation
- Supported Employment

### **ELIGIBILITY REQUIREMENTS**

- Be eligible for MA
- Be 21 years of age or older
- Be diagnosed with Autism Spectrum Disorder
- Meet the ICF/ORC or ICF/MR Level of Care assessment
- Not be receiving services through any other waiver

### **RESPONSIBILITIES OF THE CAO**

1. **Review** the Application for MA (PA 600L and applications submitted through COMPASS) and the revised HCBS Eligibility/Ineligibility/Change Form (PA 1768) for completeness. The PA 1768 has been revised to include waiver code 52 to designate the Adult Autism Waiver.

**NOTE:** The PA 600WP may be used in Community Choice counties.

2. **Determine** whether applicants, as well as current MA recipients, meet MA eligibility requirements, including look-back requirements and asset transfer requirements.
  - a. Compare the countable gross monthly income to the special MA income limit, which is 300 percent of the Federal Benefit Rate (currently \$1,911).

- b. Compare the countable resources to the \$2,000 (allow a \$6,000 resource disregard) resource limit.
- c. Refer to the following Operations Memoranda regarding look-back requirements, asset transfer requirements, and penalty periods:

[OPS 07-02-05](#)

[OPS 07-02-09](#)

[OPS 07-02-06](#)

[OPS 07-02-10](#)

[OPS 07-02-07](#)

[OPS 07-02-11](#)

[OPS 07-02-08](#)

- 3. **Apply** the Spousal Impoverishment Procedures for those applicants who are married. Refer to [OPS 06-06-03](#).
- 4. **Authorize** in CIS if the individual meets non-financial and financial MA requirements.
  - a. Enter the Adult Autism Waiver code 52 on CAMWAI.
  - b. For new applicants, authorize waiver services in category PAW, PJW, or PMW.
  - c. For non-Supplemental Security Income (SSI) MA recipients, close the MA category, register the application in a medical category, and authorize waiver services in category PAW, PJW, or PMW.

**NOTE:** Do not close the MA category and change to PAW, PJW or PMW if it is more advantageous to the remaining household members to remain eligible for MA by keeping this individual in the existing MA category.
  - d. For SSI recipients, authorize waiver services in category A, J, or M.
- 4. **Send** Notice of Eligibility/Ineligibility for the Adult Autism Waiver to all those listed below:
  - a. Individual found eligible/ineligible for the Adult Autism Waiver.
  - b. All representatives listed on the Application for Benefits.

- c. Service and/or Enrolling Agencies.
- d. Bureau of Autism Services:

Bureau of Autism Services

P.O. Box 2675

Harrisburg, PA 17105

### **ADDITIONAL INFORMATION**

- An ACCESS card will be issued for those individuals found eligible for the Adult Autism Waiver unless they have previously received one.
- Waiver recipients will be eligible for managed care in managed care counties. However, services provided by the waiver will be paid through fee-for-service. The recipient will need an ACCESS card to pay the provider for these services.
- Individuals cannot be residing in a Long Term Care facility to qualify for the Adult Autism Waiver.
- Renewals will be completed annually.
- Medical Assistance Estate Recovery provisions are applicable to this waiver for individuals age 55 or older.

### **Next Steps**

1. Review this Operations Memorandum with appropriate staff.
2. Direct any questions to your Area Manager.
3. Retain this Operations Memorandum until further notice.