

Medicaid Diversion Waiver Funded

Starting on July 1st, 2008, the Florida Medicaid Nursing Home Diversion Waiver program will open up 4,000 new slots statewide. This is the Medicaid program designed to help families, if they qualify, receive medical long term care services in the home or at certain assisted living facilities. As the name implies, the program diverts patients away from nursing homes by the delivery of these services at the patient's home. This waiver program has been approved by the Centers for Medicare and Medicaid because it saves money for the State while expanding the number of citizens served.

However, with the recent budget woes in Tallahassee, the Nursing Home Diversion Waiver program had been frozen for the past year. Any new applicants were put on a waiting list until funding became available. This fiscal year (starting in July), an additional \$20 million was put in the budget to add the 4,000 slots statewide.

Just like all Medicaid programs, there are financial and medical criteria that must be met before a patient can qualify for services. The asset test is \$2,000 for the patient and \$104,400 for the spouse at home. Certain assets do not count towards these limits including the first \$500,000 of equity in a homestead and one car of unlimited value. The patient must also meet the income test of \$1,911 per month of gross income. If the patient is over this limit, they can still qualify through the use of a qualified income trust. One thing to keep in mind regarding these limits - don't assume that you won't qualify for benefits until consulting with an attorney. In fact, it is a good idea to always seek legal advice before applying for any type of public benefits.

To qualify medically, the patient must be at risk of nursing home placement. The CARES unit of the Department of Elder Affairs conducts assessments based on the patient's ability to perform the activities of daily living which include eating, bathing, dressing, walking, transferring, and toileting. There are several different ways in which someone would qualify medically. In addition to the person's ability to do these activities of daily living, there are certain other extenuating medical circumstances that would qualify the person for benefits.

Once the patient is approved by both the CARES unit and the Department of Children and Families, the patient must choose a provider for the services. Providers in Brevard County include American Eldercare, Evercare, Universal, and some others. The latest entry onto the provider list is the Brevard Alzheimer's Foundation. The Brevard Alzheimer's Foundation is the only non-profit provider and the only locally based one. This means that any dollars generated by the Brevard Alzheimer's Foundation will stay here in Brevard County.

For more information about the Nursing Home Diversion Waiver program or the Brevard Alzheimer's Foundation program, contact the Foundation at (321) 253-4430.