ASSISTED LIVING WAIVER: Home and Community Based Services

Assisted Living Waiver Basics

The Assisted Living (AL) Waiver is a statewide program administered and operated by the Division of Medicaid (DOM).

It is designed to offer assistance and services in a home or community-based setting if you qualify for Medicaid. The program allows you to reside in a Medicaid approved assisted living facility as an alternative to nursing facility care or other institutional care.

Medicaid pays the facility a per diem for services received in the facility. If you are enrolled in the Assisted Living Waiver, you are responsible for payment of your room and board.

Who is Eligible?

To qualify for the Assisted Living Waiver, you must meet the following eligibility criteria:

- You must be age 21 or older.
- You may qualify by either Supplemental Security Income (SSI) or 300 percent of SSI. If income exceeds the 300 percent limit, you must pay the amount that is over the limit each month to the Division of Medicaid under an income trust, provided you are otherwise eligible.
- You must be determined clinically eligible through the use of a comprehensive Long Term Services and Supports (LTSS) assessment tool.
- You must require nursing facility level of care if assistance is not provided.
- Your nursing facility level of care must be certified by a physician and recertified every 12 months at a minimum.

Traumatic Brain Injury Slots on the Assisted Living Waiver

The Assisted Living Waiver has five designated waiver slots for people with acquired traumatic brain injuries who are in a family/participant crisis or have behavioral issues that require 24-hour supervision and assistance to successfully thrive in a community or residential setting. Services provided are to strengthen and support informal and formal services to meet the unique needs, cognitively and behaviorally, for people in a specialized residential setting.

Traumatic brain injury is defined as a traumatically acquired non-degenerative structural brain damage. This term does not apply to brain injuries that are congenital or due to injuries induced by birth trauma.

Who Qualifies for the Traumatic Brain Injury Residential Facility Setting?

To qualify for the traumatic brain injury residential facility setting, you must meet the following eligibility criteria:

- You must meet all other requirements for the Assisted Living Waiver.
- You must have a diagnosis of acquired traumatic brain injury which is non-degenerative structural brain damage (excludes brain injuries that are congenital or due to injuries induced by birth trauma).
- You must be in a family/participant crisis or have behavioral issues requiring 24-hour supervision.
- You must have completed acute rehabilitation treatment.

BACKGROUND

The Mississippi Division of Medicaid is a state agency that has approximately 1,000 employees located throughout one central office, 30 regional offices and over 90 outstations.

WHAT IS MEDICAID?

Medicaid provides health coverage for eligible, low income populations in Mississippi. Eligible members do not directly receive money from Medicaid for health benefits. Medicaid is separate from Medicare.
Covered Services

Upon approval of home and community based-services, the following services are offered through this waiver:

- **Case management** is a required service and you are assigned to a case manager, who is a licensed social worker. The case manager is responsible for assessing your health, welfare, and social needs; developing a plan of services and supports to address your assessed needs; and managing and coordinating services on the plan of services and supports.

Assistance and/or services provided by the assisted living facility include:

- Personal care services
- Homemaker services
- Attendant care services
- Medication oversight
- Therapeutic, social and recreational programming
- Medication administration
- Intermittent skilled nursing services
- Transportation
- Attendant call systems
- Specialized services in a residential setting if you have a traumatic brain injury

How to get more information

**QUESTIONS?**

For more information about the Assisted Living Waiver, contact:

- **Mississippi Access to Care Center (MAC Center)**
  - Toll-free: 844-822-4MAC (4622)
  - Website: [http://mississippiaccesstocare.org](http://mississippiaccesstocare.org)

- **Office of Long Term Care Mississippi Division of Medicaid**
  - Toll-free: 800-421-2408
  - Phone: 601-359-6141
  - Website: [http://medicaid.ms.gov](http://medicaid.ms.gov)

The Mississippi Division of Medicaid complies with all state and federal policies which prohibit discrimination on the basis of age, race, sex, national origin, or disability - as defined through the Americans with Disabilities Act of 1990, the Rehabilitation Act of 1973, and the Civil Rights Act of 1964.