

LONG-TERM SERVICES AND SUPPORTS (LTSS) INFORMATION

Medicaid Assistance for Individuals

ARChoices in Homecare

Assisted Living Level II

DDS Waiver

Nursing Facilities

PACE (Program of All-Inclusive Care for the Elderly)



A growing number of Home and Community-based programs are available as alternatives to Nursing Facilities. While a Nursing Facility is the right option for some people, others may find help is available to keep them at home. **If you would like to talk to a counselor about your options, call toll free 1-866-801-3435 or email choicesinliving@arkansas.gov.**

A brief description of each of these programs and their eligibility criteria can be found inside of this publication. If you are interested in the DDS Waiver program, please see the following page for application instructions. If you are interested in any of the other programs, please complete an application and return it to your local DHS county office or call for more information. A caseworker in the LTSS unit will determine your eligibility and provide additional information on available assistance. This worker may be housed in a county other than your local county.

Additional information on services may be found online at the sites listed below.

- ARChoices in Home Care <https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/find-home-community-based-services-for-adults-seniors/archives-in-homecare/>
- Level II Assisted Living <https://humanservices.arkansas.gov/divisions-shared-services/aging-adult-behavioral-health-services/find-home-community-based-services-for-adults-seniors/living-choices/>
- DDS Waiver <http://humanservices.arkansas.gov/ddds/waiverDocs/ACSWaiverGuidebook.pdf>
- Nursing Facilities <https://humanservices.arkansas.gov/divisions-shared-services/developmental-disabilities-services/about-dds/>

The following programs are available for facility and non-facility care for individuals with long-term medical needs. These programs have common income and resource requirements.

ARChoices in Homecare (ARChoices)

The ARChoices in Homecare program provides home and community-based care for individuals aged 21 and over as an alternative to institutionalization. Individuals aged 21-64 must have a physical disability as determined by SSA/SSI criteria, Railroad Retirement or the DHS Medical Review Team. ARChoices provides Attendant Care, Home-Delivered Meals, Personal Emergency Response System, Adult Day Services, Adult Day Health Services, Adult Family Home, Respite Care, and Environmental Accessibility Adaptations/Adaptive Equipment Services. ARChoices provides the full-range of Medicaid benefits. Individuals eligible for ARChoices require an Intermediate Level of Care as determined by the Office of Long Term Care. Individuals requiring Skilled Care are not eligible.

Individuals with income over the current limit may become Medicaid eligible by establishing an Income Trust. Applicants with spouses living in the community are eligible for the division of spousal resources, but not for spousal income as the recipient does not contribute income to his or her care except for individuals in Adult Family Homes.

Assisted Living Facilities Level II – (ALF)

Assisted Living Facilities provide assistance with activities of daily living to individuals that are aged, blind or have a physical disability in a residential setting. Living units and common space are provided to address all activities of daily living on a 24-hour basis. Individuals in Level II Assisted Living Facilities are eligible for the full-range of Medicaid benefits. Room and board costs are not included in the waiver coverage. Assisted Living Facilities Medicaid requires an Intermediate Level of Care as determined by the Office of Long Term Care. Individuals requiring Skilled Care are not eligible for this program.

Individuals with income over the current limit may become Medicaid eligible by establishing an Income Trust. Non-institutionalized spouses of Assisted Living Facility recipients are eligible for the division of spousal income and resources.

Developmental Disability Services - (DDS)

DDS provides both home and community-based waiver services for individuals with developmental disabilities who would otherwise require care in an institution. An individual applying for Waiver services must be financially eligible and meet the level of care required for admission to an Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID). The DDS Waiver provides the full-range of Medicaid benefits as well as other specialized services. To apply for DDS waiver services, please complete an application or talk with a DDS worker. If the applicant is an **adult**, contact DDS Adult Services at **(501) 683-5687** or **(501) 852-8556**. If the applicant is a **child**, contact DDS Children's Services at **(501) 682-2277**.

Nursing Facilities

Nursing facilities are institutions that provide medically necessary care 24 hours per day for residents who require skilled nursing care, rehabilitation services or health-related care and services above the level of room and board and not primarily for the care and treatment of mental diseases. Recipients receive the full-range of Medicaid benefits. Medicaid also pays all or a portion of the monthly facility vendor payment depending on the monthly income to be considered.

Individuals in Nursing Facilities with income over the current limit may become eligible for Medicaid by establishing an Income Trust. The DHS caseworkers have information about Income Trusts.

Non-institutionalized spouses of Nursing Facility recipients are eligible for the division of spousal resources and income.

In addition to being income and resource eligible, the Nursing Facility resident must be aged, blind or an individual with disabilities and require medical care of a certain level, determined by the Office of Long Term Care.

PACE - (Program of All-Inclusive Care for the Elderly)

PACE is a comprehensive health and social services program that provides and coordinates primary, preventive, acute and long-term care services for individuals 55 years of age or older who need nursing facility care. Services are provided in PACE Centers, in the home and in inpatient facilities. Individuals eligible for PACE must live in an area served by a PACE program and be able to live in a community setting without jeopardizing their health or safety.

PACE applicants with income over the income limit may become eligible for Medicaid by establishing an Income Trust. DHS caseworkers have additional information regarding Income Trusts. PACE participants with spouses living in the community are eligible for the division of spousal income and resources.

Individuals eligible for PACE require a nursing home Level of Care as determined by the Office of Long Term Care. The PACE program is available to individuals who live in Craighead county and also within certain zip codes in Greene, Poinsett, Randolph, Lawrence, Mississippi and Cross counties in Northeast Arkansas and within certain zip codes in Faulkner, Lonoke, Pulaski, and Saline counties in Central Arkansas. To determine if you live in an area covered by PACE, please call **1-855-207-7500** for counties **in Northeast Arkansas** and **1-501-376-8852** for counties **in Central Arkansas**.

Income and Resource Limits

Income Limit

The income limit for all of the LTSS programs is three times the current SSI Standard Payment Amount (SPA) for an individual. The income limit for 2024 is \$2,829.00. The income limit usually increases at the first of each calendar year. Only the income of the applicant is counted toward this limit. For residents of Nursing Facilities, Assisted Living Facilities, and Adult Family Homes, if there is a non-resident spouse, the spouse may be eligible to keep all or a portion of the income of the spouse living in the facility.

Resource Limit

The resource limit for the covered individual is \$2,000. In all LTSS programs, if the covered individual has a spouse, the spouse may be eligible to keep all or a portion of the total spousal resources. See Resource Rule below.*

***RESOURCE RULE FOR SPOUSAL RESOURCES**

If total resources are under \$30,828 – CS (Community Spouse) gets all.

If total resources are \$30,828 to \$61,656 – CS gets \$230,828

If total resources are \$61,656 to \$308,280 – CS gets one-half.

If total resources are over \$308,280 – CS gets \$154,140 (the maximum effective 01-01-24)

These amounts usually increase annually dependent on the cost of living increase.



When completing an application for Long-Term Services and Supports, you will be asked to provide some items to help determine your eligibility.

See page 6 of the application for some examples.