How to Enroll in Medicaid Long-Term Care Programs



Family Care, Family Care Partnership, IRIS, PACE

There are many programs that can help with **long-term care** for those who live in Wisconsin. **Medicaid** funds some of these long-term care programs (**also called Medicaid waiver programs**), which include:

- **Family Care**—this is a program for older adults and adults with disabilities. Members get a range of long-term care services through one benefit program. Members of Family Care continue to use their Medicaid card for health and medical services and prescription drugs.
- Family Care Partnership—this is a program for older adults and adults with disabilities. Members get a range of long-term care, health and medical services, and prescription drugs through one benefit program.
- **IRIS (Include, Respect, I Self-Direct)**—this is a self-directed program for older adults and adults with disabilities. Participants decide what home and community-based goods, supports, and services will help meet their needs and goals. After enrolling, participants receive a budget to use for those goods, supports, and services.
- PACE (Program of All-Inclusive Care for the Elderly)—this is a national program for adults who are 55 years or older. Members must live in Kenosha, Milwaukee, Racine, or Waukesha counties to participate. Members get a range of long-term care services, health and medical services, and prescription drugs through one benefit program.

Note: You can only enroll in one Medicaid long-term care program at a time. All programs are voluntary. Voluntary means it is your choice to enroll. You can choose to leave the program at any time.

Terms to know

Long-term care

This is a service or support you may need because of one or more of the following:

- You are age 18–59 and have a disability.
- You are age 65 or older (55 or older for PACE).
- You have a lasting or chronic condition.
- You need help with daily tasks, such as getting dressed or bathing.

Medicaid

This is a state and federal government program. The program provides health care coverage to people with limited income and resources.

Medicaid waiver programs (also called publicly funded long-term care programs) These are programs that allow states to use Medicaid funds to provide long-term care services in people's homes and communities.



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Steps to enroll

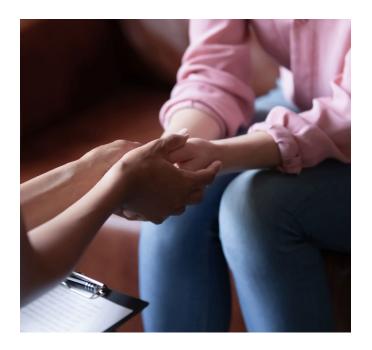
Enrolling in a Medicaid long-term care program may take one to three months, in most cases.

The process includes these steps:

1. Contact your ADRC or Tribal ADRS.

Your local ADRC (aging and disability resource center) or Tribal ADRS (aging and disability resource specialist) can help you get started. They will help you learn about the options available to you and the requirements to enroll in one of these programs. ADRC and Tribal ADRS services are free for all who live in Wisconsin.

- <u>Find your local ADRC</u> (dhs.wisconsin. gov/adrc/consumer/index.htm).
- <u>Find your Tribal ADRS</u> (dhs.wisconsin. gov/adrc/consumer/tribes.htm).



2. Determine functional eligibility with the functional screen.

Your ADRC or Tribal ADRS will meet with you to complete a functional screen. The goal of the screen is to measure your level of need for services. The screen also determines if you meet program requirements.

3. Determine financial eligibility.

Medicaid long-term care programs have different financial requirements. They depend on whether you already receive full Medicaid benefits or not:

- If you receive full Medicaid benefits, you don't have to complete the financial application process. However, you will need to answer some questions. These questions make sure you are eligible financially for Medicaid long-term care programs.
- If you don't receive full Medicaid benefits, your ADRC or Tribal ADRS can help you complete a financial application. They will help you contact an income maintenance agency. The income maintenance agency will process your financial application to see if you are eligible. Based on your income and expenses, the income maintenance agency also will determine if you must pay a cost share to enroll in a Medicaid long-term care program. A cost share is a monthly amount that some members may have to pay to their Medicaid longterm care program.

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4. Learn about your program options.

Your ADRC or Tribal ADRS will contact you. They will let you know if you meet functional and financial requirements for a Medicaid long-term care program. They also will explain any other program requirements. If you are eligible, they will share which programs are available to you. They will help you understand these options, so you can make the best decision for you. This process is called enrollment counseling.

5. Finalize enrollment.

If you choose to enroll in or are referred to a Medicaid long-term care program, your ADRC or Tribal ADRS will help you:

- Complete the enrollment or referral paperwork.
- Notify the agency you choose about your enrollment or referral to their program. Within three days of your enrollment or referral date, the agency will make an initial phone call to contact you. They will then schedule a visit to work with you to plan how to get the services and supports you need.

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Notes: