

CONTINUITY OF STAY**I-400****I - 410 REQUIREMENTS****Initial Eligibility**

Eligibility under the Special Income Level (SIL) is based on an individual continuously residing in a medical institution or receiving Home and Community Based Services under a waiver for a period of 30 consecutive days.

Continuity of stay applies to the following settings:

- Nursing facilities,
- ICF/**DD** facilities,
- Home and Community Based Services provided under a Waiver and
- acute care hospital admissions for aged, blind and disabled adults who have little or no income.

Continuity of stay does not apply to the following LTC admissions:

- LIFC, PAP, CHAMP, LaCHIP, and C-MNP *enrollees*,
- SSI cash recipients, or
- individuals who are already eligible for **full** Medicaid benefits (MNP, Pickle, DAC, etc.)

Consider continuity of stay to be met if the individual:

- is expected to reside in a medical institution for at least 30 consecutive days,
- is expected to receive HCBS services for at least 30 consecutive days, or
- dies during the first 30 days of institutionalization or receipt of HCBS.

I - 410 Continued

Stays in hospitals, more than one LTC facility, or receipt of HCBS and any combinations of these without discharge to home, can be used to meet 30 days continuous stay.

Note: Obtain supervisory concurrence that an acute care hospital stay is expected to last for at least 30 days.

If the continuity of stay requirement is met, eligibility may begin on the date of admission or date of BHSF Form 142 approval, whichever is later, if all other eligibility requirements are met.

Example:

An individual enters a hospital on March 21 and is discharged to a LTC facility on March 26. The individual remains in the LTC facility through April. The individual met the continuity of stay requirement on April 20 and may have eligibility considered for LTC vendor payment for March, the month of admission.

Continuing Eligibility

Continuity of stay applies as a condition of on-going Medicaid eligibility under the LTC Special Income Level (SIL). Once eligibility is determined under the SIL, the individual must continue to reside in a medical facility or receive waiver services in order to remain eligible.

Continuity of stay is broken if the individual leaves the facility or does not receive a waiver service during a period of thirty (30) or more consecutive days. The first day of leave begins once the individual has been away from the facility (or has not received a waiver service) for a period of 24 continuous hours.

Stays in hospitals, LTC facilities (NF or ICF/**DD**), receipt of HCBS or any combinations of these without discharge to home, does not break thirty (30) days continuous stay.

I - 410 Continued

The following situations break continuity of stay:

- Discharge from HCBS waiver services or a medical institution without being directly admitted to another institution or waiver program.
- An absence of more than thirty (30) consecutive days on home leave even if the LTC facility/or HCBS provider does not discharge.

Example:

A LTC enrollee eligible under the Special Income Level (SIL) leaves the facility on approved home leave days at 3:00 pm on June 10 and scheduled to return to facility on July 8. However, the enrollee does not return to the facility until July 12 because the family takes the enrollee on a family trip to the Gulf Coast to celebrate the July 4th holiday. The enrollee's 30 consecutive leave day limit expired at 3:00 pm on July 10.

The following situations do not break continuity of stay:

- A temporary absence of less than thirty (30) consecutive leave days during which the individual is not discharged from the facility;
- Discharge or direct transfers between institutional settings or HCBS;
- Home leave days which are part of the individual's plan of care as long as the individual remains under the jurisdiction of the facility.

I - 420 VERIFICATION

At application, consider continuity of stay met if individual is expected to reside in a medical institution or receive HCBS services for at least 30 days.

Re-establish continuity of stay at renewal and at any time there is a change in the enrollee's residential status.

Sources of verification include, but are not limited to:

- Statement of the Medicaid enrollee or their authorized representative, BHSF Form 148 or telephone contact with the LTC facility,
- hospital records, correspondence, forms, or telephone contact, or
- death certificate.

I - 430 DOCUMENTATION

Document dates and file sources of verification to support continuity of stay requirements.