



LTSS Presumptive Eligibility Program

Under the 1115 Medicaid Transformation Project (MTP) waiver, Long-Term Services and Supports Presumptive Eligibility (LTSS PE) is a package of services that allows the state to waive certain Medicaid requirements. LTSS PE provides individuals an opportunity to access specific home and community-based services in their own home and Medicaid medical coverage more quickly, for a limited time, while full functional and financial eligibility are being determined.

Services that may be covered under the LTSS PE Program:

- Personal Care Services for clients with Medicaid Personal Care (MPC) level of care - maximum of 34 hours/month; **or**
- Personal care services for clients with Nursing Facility Level of Care (NFLOC) – maximum of 103 hours/month, **and**
- Nurse Delegation
- Personal Emergency Response System (PERS)
- Home delivered meals
- Specialized medical equipment and supplies
- Assistive/Adaptive technology & equipment
- Community transitions or sustainability services
 - Security deposits that are required to lease an apartment or home
 - Activities to assess need, arrange for, and obtain needed resources
 - Set-up fees or deposits for utilities, such as telephone, electricity, heating, water, & garbage
 - Services necessary for your health and safety such as pest eradication and one-time cleaning prior to occupancy
 - Moving expenses
 - Minor home accessibility modifications necessary for hospital discharge
- Community choice guide
- Supportive Housing

Who qualifies for LTSS Presumptive Eligibility?

You may qualify for presumptive eligibility for Medicaid if you meet all the following:

- You live in your own home.
- You are discharging from an acute care hospital or community psychiatric hospital or have discharged in the last 30 days.
- You attest that your income is below the monthly limit.
- You are a U.S. citizen, U.S. national, or eligible immigrant.
- You are not receiving any other Medicaid funded long-term services & supports.
- You have not had presumptive eligibility for Medicaid in the last 24 months.

How do I apply?

Call or visit your local HCS office to get a Washington Apple Health for Long-Term Care/Aged, Blind, Disabled Coverage application (18-005).

You may also apply for Health Care Coverage including Medicaid at wahealthplanfinder.org.

If you need help filling out your application, call your local HCS office or the Senior Information and Assistance office.