

Your Responsibility for Participation Towards Costs of Care at a Residential Habilitation Center

Date:

To:

From:

Due to your admission to receive services at a Department of Social and Health Services (DSHS) Residential Habilitation Center (RHC), you may receive notice that you are responsible to pay a part of the cost of your care. The amount you owe is called participation.

Developmental Disabilities Administration (DDA) Long-Term Care and Specialty Programs Unit (LTC) will send you a participation notice when you are newly approved for institutional benefits and when your benefits are recertified after an eligibility review. A notice will also be sent if your income, assets, or expenses change, as it affects your participation amount.

There are three entities involved in managing the participation for your services at an RHC:

- 1) Your payee is the primary keeper of your daily financial records to pay your participation. This may be the RHC.
- 2) LTC will determine your financial eligibility for Medicaid coverage and determine your participation amount.
- 3) The Office of Financial Recovery (OFR) is responsible for collecting your participation and maintains a full record of your transactions. A statement is mailed to you monthly by OFR.

DSHS will ask for information regarding your income, assets, and expenditures. If you have a legal representative, they will be responsible for providing the information requested. Using this information, LTC will determine your participation amount. You will receive a monthly billing statement from OFR with a return envelope and a coupon. The coupon needs to be included with your payment.

Washington Administrative Code (WAC) 182-513-1380 describes how income, excess resources, and expenses are used when determining your participation:

- Income and wages, including Social Security benefits and Supplemental Security Income (SSI)
- Resources above the \$2,000 limit, including sale or transfer of property
- State and/or federal taxes
- Court-ordered fees you pay to your legal guardian
- Spousal support
- Child support or family maintenance costs
- Medical expenses including health insurance premiums
- The cost of maintaining a home in the community, under certain circumstances

The responsibility to pay towards your cost of care is described in RCW 43.20B.430, 43.20B.435, and WAC 388-835-0940. If you fail to pay this debt, the department may take further collection action against you. If you do not agree with the findings, you will be given an opportunity to request an administrative hearing.

By my signature below I assert that I have received and read this document:

CLIENT / LEGAL REPRESENTATIVE DATE

Instructions

When is this form used?

The form is to be used when a client is admitted to a Residential Habilitation Center.

Who must receive this form?

This form is intended to be handed out to the client and/or the client's representative during admission to the RHC. If the client representative is not present at admission the form should be mailed to them requesting return.

Who is responsible to ensure this form is received?

The RHC admissions coordinator must provide this form as part of this admissions package. The RHC will ask the client and/or representative to read and sign the form, keep the original, and give a copy back to the representative.