

# Keeping Elders and People with Disabilities Living Well in the Community

Medicaid Long-Term Service Waivers and Other Supports





# Quick Facts About Aging and Disability in Indian Country



**Over 1 Million  
Native People with Disabilities\***



Nationwide, **89.7%**  
of **Elders** have at  
least one **chronic  
disease**<sup>(1)</sup>



**Nearly 10% of those with  
disabilities  
are CHILDREN\*\*  
Under the Age of 18**<sup>(2)</sup>

\*Out of 253 Native communities surveyed nationwide, not including people who were inpatient/nursing homes.

\*\*AI/AN children (0-18) had the HIGHEST rates of disability than any other population group – 5.9% almost double the rate of non-Native children.

- American Indian and Alaska Native children have one of the **highest rates of autism** per capita.
  - The majority of resources/supports for children with intellectual, cognitive, and/or behavioral needs is supplied through public schools – but the child must have a doctor’s diagnosis to access supports and services.
  - Reduced IHS testing resource mean longer wait times for families and longer waits for supports and resources.
  - It costs **FOUR TIMES** more to raise a child with special needs.(3)
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# Aging + Disability = Higher Needs & Cost of Care<sup>(4)</sup>

Tribal Area	HCBS Service	Average Monthly Cost**
Montana	Homemaker/Chore	\$3671
Oregon	Homemaker/Chore	\$3814
Washington	Homemaker/Chore	\$4195
Tribal Area	Nursing Home	Average Monthly Cost
Montana	Semi-Private	\$8456
Oregon	Semi-Private	\$15,938
Washington	Semi-Private	\$13,688

**\*\*Based on 22 hours of care per week. This would vary in an individual case.**



# IHS Long-Term Care Funding for ITUs





\$0.00



# Home and Community-Based Supports (HCBS)<sup>(5)</sup>

*The Key to Keeping Our Communities Together*

# HCBS Waivers

## The Cheese on the Baloney Sandwich of Medicaid



- Medicaid follows the “Sameness Rule” – every enrollee gets the same State medical services no matter what.
- HCBS Waivers allow state Medicaid programs to offer specific extras to specific groups of people – like Elders, the blind and people with disabilities



**Home Delivered Meals**

**Transportation (medical appointments, bank, shopping, ceremony)**

**Chore Work (lawn mowing, cutting firewood)**

**House Keeping**

**Durable Medical Equipment (Walkers, Wheelchairs, Commode Chairs)**

**Snow Removal**

**Life Alert (Personal Emergency Service)**

**Home Modifications for Accessibility**

**And more....\***

**Elder Services/Title VI**

**Health Center/Clinic**

**Tribal Housing**

**Community Health & CHRs**

**Transportation**

**Family Services**

**Examples of Medicaid Billable HCBS Services in Our Communities  
(And Where to Find Them!)**

# Self-Reported Elder HCBS Needs\*



Home Delivered Meals\* 72%



Home Modifications 34%



Transportation 41%



Personal Care Support 30%



Homemaker/Chore Service 35%

[\\*https://www.nrcnaa.org/needs-assessment](https://www.nrcnaa.org/needs-assessment)



# Other Funding Opportunities for ITUs

- Title VI Elder Funds (Only distributed directly to Tribes)
- Title III State Aging (Any Elder age 60+ - Tribes and UIOs can be contracted providers)
- Partnering with State Aging and Disability Resource Centers (ADRC)
- Medicare (Anyone with a qualifying disability can enroll at any age)



# Patient Enrollment and ITU Billing

Who is Eligible and How Can ITUs Be Reimbursed?



## Medicaid Waiver Eligibility

- **Financial Assessment**
  - Income at or below Medicaid limits (FPL)\*
- **Functional Assessment**
  - Frail Elderly, Blind, Disabled (including certain chronic conditions)
  - At or in danger of a nursing home level of care

**Native Medicaid enrollees MUST be allowed to choose an ITU as a service provider. In Managed Care Medicaid ITUs MUST be treated and paid as in-network(6)**



# Can You Enroll in HCBS if You Are Over Medicaid Income – YES!

- Must meet the FUNCTIONAL eligibility
- Excess income usually results in a Patient Spend-Down (like a deductible)\*
- Certain Indian Monies/Assets are exempt from Medicaid Adjusted Gross Income (MAGI)<sup>(7)</sup> and Medicaid Estate Recovery<sup>(8)</sup>



# \*Patient Share/Spend Down – The Only Medicaid Cost Share for Native Enrollees

- Part of the formula that allows people who are over Medicaid income due to non-exempt assets (gaming per cap and other income/assets) to still enroll
- Waiver enrollees ALSO get Medicaid medical card benefits\*
- Tribes can pay for this cost-share and it is still MAGI exempt<sup>(8)(9)</sup>





## ITU's as HCBS Waiver Providers

- **AFA/638 Update**
  - Add statement to IHS funding agreement noting HCBS services
- **NPI Record Update or Add New**
  - Include taxonomies for HCBS services
- **Provider Requirements**
  - Check into special requirement or contracts with State Medicaid for Waiver programs



# IYKYK – Important Notes for ITUs as Medicaid HCBS Providers

- Billed like medical claims, including units, time, date spans, and primarily using HCPCs codes
- ITUs are NOT required to contract with Managed Care Organizations (6)
- ITUs without an MCO contract must be paid as In-Network, even when out of state (6)
- CMS requires State Medicaid to perform an electronic verification of assets for HCBS enrollees- program cannot tell what is “Indian Exempt” (11)





Is it worth it to bill for  
Medicaid HCBS?

*What do the  
numbers look like?*



SERVICE	2019 TITLE VI TOTAL UNITS	AVERAGE RATES*	POTENTIAL YEARLY REIMBURSEMENTS
HOME DELIVERED MEALS	2,583,369	\$5.50/meal	\$14,208,529.50
PERSONAL CARE	45,333	\$14.60/Hour	\$661,861.8
HOMEMAKER	109,438	\$14.60/hour	\$1,597,794.8
TRANSPORTATION TRIPS	762,798	\$0.55/Mile, Average round trip 40 miles	\$16,781,556

2019 Title VI Aging Aggregate Reports (AGID Public Database)

This data is from the aggregate totals reported by tribal Title VI Elder programs.

The potential reimbursements are based on nationwide Medicaid average rates.

NOTE: NSP CANNOT be claimed for Medicaid billed meals.





# Questions



# CITATIONS

1. <https://www.nrcnaa.org/assets/5727-26690/2020-2023-survey-of-elders-cycle-8-final-report.pdf?v=2>
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Aniwahya Consulting Services has been serving ITUs since 2017. Our goal is to aid in building self-sustaining home and community-based support programs across Indian Country to help all of our Relatives live well at any age and ability in the places they call home.

