HOME AND COMMUNITY-BASED **SERVICES**





Who We Are

Established in 1911, Maryland Legal Aid is a statewide private, nonprofit law firm that provides free, civil legal services to lowincome and vulnerable people to address their most fundamental legal problems. From our 12 offices throughout the state, we help our clients preserve and access safe and affordable housing, maintain and regain custody of their children, and be safe from domestic violence. Maryland Legal Aid increases our clients' economic security by defending against consumer debt, including foreclosures and tax sales, removing barriers to employment, and accessing critical income supports such as unemployment, food stamps and other vital public benefits. Through special projects, we represent elder adults, nursing home residents, migrant farm workers, and children in alleged abuse and neglect cases. In its advocacy, Maryland Legal Aid seeks systemic change through impact litigation, in our advocacy, and by storytelling.

Know Your Rights!

This brochure is for Maryland residents and contains general information about your rights, but is not meant to be legal advice. Every effort is made to keep this information current. However, the law sometimes changes. If you need information about your specific situation, or if you have a pending legal case, you should seek counsel from Maryland Legal Aid or another legal resource.

What programs and services are available for me to receive help with care in the community?

Maryland has a variety of programs and services offered through Medicaid ("Maryland Medical Assistance"). These programs and services both to help people remain in the community to avoid institutionalized care and to assist people who live in nursing home settings return to community settings. These programs and services have financial criteria in addition to a medical need for care, often called level of care. Some common examples include Community First Choice and the Home and Community-Based Options Waiver.

Maryland Access Point provides counseling options and can provide assistance with getting started with the application processes.

Maryland Access Point:

By phone: 1-844-MAP-LINK (1-844-627-5465)

Online:

marylandaccesspoint.211md.org

What is Community First Choice?

Community First Choice (CFC) is a service for older adults and persons with disabilities who live in a community setting. Through this program, you may be able to stay in your own home and get help with everyday activities.

You may be eligible for CFC if you receive the following public benefits:

Medicaid

Medicaid and Medicare

Foster Care

Supplemental Security Income (SSI)

Temporary Cash Assistance (TCA)

You are not eligible for CFC if you receive the following public benefits:

Private health insurance only

Medicare only

Specified Low Income Medicare Beneficiary (SLMB)

Qualified Medicare Beneficiary (QMB), except in limited circumstances

What is the Home and Community-Based Options Waiver?

The Home and Community-Based Options Waiver (HCBO) Waiver is a program for older adults and persons with disabilities. An individual living at home in the community must apply through a registry process to become prioritized for an application. An individual receiving services in a skilled nursing facility/nursing home may apply directly to the program to facilitate transitioning back to the community.

The HCBO Waiver is accepted at many assisted living facilities and can help with payment when an individual wants to transition from a nursing home to an assisted living facility.

You may be eligible for HCBO Waiver if:

- Your income is less than 3x the maximum SSI amount
- You need assistance with at least two (2) activities of daily living
- You live or are trying to transition to a community setting

You are not eligible for HCBO Waiver if:

 You have over \$2,000 in certain resources available to you, such as savings accounts

What is the medical criteria for home and community-based services?

In general, to qualify medically for home and community-based services, you must need help with at least two activities of daily living:

- Bathing
- Eating
- Dressing
- Mobility, such as walking, using stairs or getting in or out of bed
- Toileting

To qualify for CFC or HCBO Waiver, you must need help with at least two of these activities of daily living, but there are other home and community-based services that only require the need for assistance with one activity of daily living.

What additional assistance can I get if I am approved?

If you are eligible for home and community-based services, including CFC or HCBO Waiver, you have a right to develop a plan of service so you can get the personal assistance you need as well as help with other activities in your life, such as:

- Planning and preparing meals
- · Light chores
- · Grocery shopping
- Traveling

- Managing finances and handling money
- Using the phone and other means of communication

You may also get additional services, such as:

- Personal Emergency Response System
- Home Accessibility Adaptations
- Home Delivered Meals
- Disposable Medical Supplies
- Durable Medical Equipment

You have the right to choose a supports planning agency.

A supports planning agency is contracted by the Maryland Department of Health to provide direct support to a recipient to help the recipient receive their benefits.

- Your supports planning agency will assign a supports planner to help you develop your plan of service.
- Your supports planner must address your individual needs.

You have the right to have as much control as possible over the care you receive.

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You have the right to:

- Have the supports you need to be in charge of your own care.
- Choose the person who provides care for you.
- Decide the schedule for that person.
- Decide you no longer want someone to care for you.

How does the state (Maryland Department of Health) determine what your plan of service should be?

1. A nurse from the local health department will meet with you and evaluate your medical and physical care needs. This assessment will determine whether you are medically eligible. It will also determine how much the State will spend on services for you, which is called your "personal budget." Most people use a large part of their personal budget for personal assistance services. The amount of your budget for personal assistance services will determine how many hours of care you can get a week.

- 2. If you are eligible for community-based services, a supports planner will assist you in determining what help you need. The supports planner prepares a written document about your needs, called the "plan of service," and then sends it to the Maryland Department of Health for approval.
- 3. Medicaid staff reviews the local health department's assessment, your plan of service, and any additional supporting documentation provided. Based on this information, Medicaid will either approve or deny your plan of service.

If my income increases and I receive a notice stating that I am no longer eligible for services under CFC, what are my options?

In 2019, the General Assembly passed legislation requiring the state to assess individuals who are no longer eligible for CFC services due to becoming eligible for Medicare. If you are terminated from CFC after being approved for Social Security Disability Income or Retirement benefits, you should ask to be assessed for HCBO Waiver services.

What are my rights if I disagree with the State's decision about my home and community-based services?

If your plan of service is denied, of if you disagree with ANY decision about your case made by Medicaid, you have a right to appeal.

- If you are currently receiving home and community-based services, including CFC or HCBO Waiver, you must appeal within 10 days from the date of the denial letter for your current services to remain in place. If your plan of service is denied on an initial application and you have not begun receiving services, you have 90 days from the date of the denial letter to submit your appeal.
- If you have received a written denial, you should appeal in writing to the Maryland Office of Health Services, as described in the denial. You can submit your written appeal by fax at 410– 333–5154) or mail to:

Maryland Department of Health Office of Health Services Attention: Appeals 201 W. Preston St., 1st Floor Baltimore, Maryland 21201

How can I apply or get more information?

- Call Medicaid at 410-767-1739 or 1-877-4MD-DHMH. For MD Relay Service, call 1-800-735-2258
- Or go to: https:// mmcp.health. maryland.gov/longtermcare/Pages/ Community-First-Choice.aspx

How can I get help with an appeal?

Maryland Legal Aid may be able to assist you, or you can contact a private attorney. Contact Maryland Legal Aid at 1–888–465–2468. The Lawyer Referral Service in your county can help you find a private attorney as well.

Maryland Legal Aid Offices

Centralized Intake: 1-888-465-2468

is now serving all jurisdictions:

Offices

Allegany/Garrett

138 Baltimore Street Suite 204 Cumberland, MD 21502

Anne Arundel/Howard

2024 West Street Suite 204 Annapolis, MD 21401 3451 Court House Drive 2nd Floor Ellicott City, MD 21043

Baltimore City

500 E. Lexington Street Baltimore, MD 21202

Baltimore County

215 Washington Avenue Suite 305 Towson, MD 21204

Cecil/Harford

103 S. Hickory Avenue Bel Air, MD 21014

Lower Eastern Shore Dorchester, Somerset, Wicomico, Worcester

201 E. Main Street Salisbury, MD 21801

Midwestern Maryland Carroll, Frederick, Washington

22 S. Market Street Suite 11 Frederick, MD 21701

Montgomery County

600 Jefferson Plaza Suite 430 Rockville, MD 20852

Prince George's County

8401 Corporate Drive Suite 200 Landover, MD 20785

Southern Maryland Calvert, Charles, St. Mary's

15045 Burnt Store Road Hughesville, MD 20637

Upper Eastern Shore Caroline, Kent, Queen Anne's, Talbot

106 N. Washington Street Suite 101 Easton, MD 21601

TTY Users: Call Maryland Relay, Dial 7-1-1

www.mdlab.org

For more information

www.peoples-law.org

For self-help legal information and community resources

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