



Medicaid Payment Policy

We currently accept and provide services to clients whose payment source is through the Medicaid program. In the future, should Cascade Park Communities choose to withdraw from the Medicaid program, we will continue to provide services to residents who were receiving Medicaid on the day before the effective date of the withdrawal or who have been paying us privately for at least two years and who will become eligible for Medicaid within 180 days of the date of withdrawal. We may transfer or discharge residents who do not meet the criteria described in this section for nonpayment, even if the resident becomes eligible for Medicaid. We may also transfer or discharge should a resident exceed our care capabilities, as outlined in our Disclosure of Services.

Privately-Paying Clients (Prospective and Current)

Privately-paying clients who, in the future may seek and obtain funding via the Medicaid program for purposes of paying for community-based long term care services, may become eligible to receive those services in this boarding home. The privately-paying client must:

- Continue paying privately until the Medicaid funding is approved by DSHS and deemed effective by the facility. Cascade Park Communities does not require a minimum private pay period prior to Medicaid conversion, however, a resident's account must be in good standing at the time of conversion.
- Move to a studio (Vista) or shared (Gardens) apartment that is designated by Cascade Park Communities as a Medicaid apartment per availability OR if approved by the Administrator, the resident can stay in a private 1 bedroom (Vista) or private studio (Gardens) apartment if their family members pay private funds to make up the difference from what the State pays and what our current going rates are.

Medicaid Bed-Hold & Vacation Policy

If a Medicaid resident is out of the building for more than 20 days for either health reasons or 18 overnight vacation days, the resident's Power of Attorney must pay private funds to continue holding the apartment, paid at the current maximum rate that Medicaid establishes, or the resident must relinquish residency and move out.



SUPPLEMENTAL PAYMENTS FOR MEDICAID RESIDENTS

Policy:

The Medicaid payment, in addition to any resident participation assigned by the department is payment in full for services, items, activities, room, and board as described in WAC 388-78A, WAC 388-110 and identified in the facility's contract with the department. However, this facility may choose to request supplemental payments for those services and amenities requested by Medicaid-funded residents that are not covered in the Medicaid daily rate.

Procedure:

Cascade Park Communities (*comprised of Cascade Park Vista and Cascade Park Gardens*) may request supplemental payment for Medicaid funded individuals who wish to reside in the following bedrooms or units: One-bedroom units within Cascade Park Vista; Private Studio units within Cascade Park Gardens.

When private-pay residents converting to Medicaid-funded care reside in a bedroom or unit exceeding the requirements of the Medicaid contract, the facility may request a supplemental payment.

Private-pay residents converting to Medicaid while living in a bedroom or unit exceeding the requirements of the Medicaid contract who do not wish to provide supplementation will be required to move into a Medicaid-designated unit.

OR

If, at the time of conversion to Medicaid, there is not a Medicaid-designated unit available or a supplemental payment is not available, the facility will allow the resident to remain in the unit exceeding the requirements of the Medicaid contract until a Medicaid-designated unit is available.

The facility will notify the Medicaid-funded resident's case manager when the Medicaid-funded resident chooses to reside in a bedroom or unit for which the contractor requests a supplemental payment under this policy.

When a Medicaid-funded resident and/or his or her representative requests additional services, items, activities, room, and/or board not covered in the daily Medicaid rate, the resident will begin receiving those requested items or services on the first day of the month following the request and upon receipt of a signed supplemental payment agreement.

Prior to admission and for residents at the creation of this policy and at least every 24 months thereafter, this facility will notify all residents of the services, items, activities, room, and board features that are not included in the Medicaid contract, and the cost of those services, items, activities, room, and board.

The facility will document in the Medicaid-funded resident's health file:

The services, items, or activities for which the contractor is receiving supplemental payments, or the apartment for which the contractor is receiving supplemental payment;

The individual responsible for paying the supplemental payment;

The amount of the supplemental payment(s); and

The private-pay charge for the unit or bedroom for which the contractor is receiving supplemental payment.

Washington Administrative Code WAC 388-105-0050 and 0055 that governs the requesting of supplemental payments from a Medicaid resident or applicant by a contractor.

By signing below you acknowledge that you have read this form and a representative of Cascade Park Communities has explained it to you.

Resident Signature

Date

Representative Signature (if applicable)

Date

Boarding Home Representative Signature

Date