Comparison of Home and Community Based Long Term Care Programs

Individuals who are eligible for **Medicaid-Funded Long Term Care** supports and services now have more choices. These include nursing homes, the Program for All-Inclusive Care for the Elderly (PACE), MI Choice, and Adult Home Help. Private pay options are also available. This chart compares the features of the programs that offer alternatives to nursing home care. The purpose is to allow individuals to make informed choices about the program that will best meet their needs. Not all programs are currently available in all areas of the state. *In addition to these programs there are a variety of private pay programs available. Medicaid is traditionally the payer of last resort; due to this, individuals who qualify for veterans' services should explore these options first.*

Program Feature	**PACE**	**MI Choice/Project Choices**	**Adult Home Help**	**Nursing Facility** Information listed represents basic care and not other rehabilitation or skilled care services facilities may offer	**Veterans' Programs**
Individual must be eligible for admission to a nursing facility based on LOCD	YES	YES	NO	YES	All veterans or surviving spouses of deceased veterans should contact their local VA office to explore benefits related to long term services and supports. Clinton and Ingham County VA 517-887-4331 Eaton County VA 517-543-3740 Benefits MAY include: In Home Care Healthcare Services Mental Health Services Assisted Living Nursing Facility care Home Modification Burial Other Emergency or Crisis Related Issues
Must have both Medicare and Medicaid to qualify	NO	NO	NO	NO	
Combines Medicare and Medicaid Benefits	YES	NO	NO	Depends on the situation	
Program Income Limit (gross monthly income)	Special Income Limits - Individuals can have a gross income of up to 300% of SSI ($2,982 per month in 2026) and qualify for enrollment. *Medicaid eligibility can be presumed, and special spousal protected asset limits apply. *Income of spouse not counted.	Special Income Limits -Individuals can have a gross income of up to 300% of SSI ($2,982 per month in 2026) and still qualify for enrollment. *Medicaid eligibility can be presumed, and special spousal protected asset limits apply. *Income of spouse not counted.	Individuals must be receiving Medicaid to be eligible. (133% of the federal poverty level) *Medicaid eligibility must be approved, and asset limits apply - $9,660 for one person and $14,910 for a couple.	Income must be less than the cost of care provided. *Medicaid eligibility is presumed, and special spousal protected asset limits apply.	
Age Requirement	55 years or older	18 years or older	18 years or older	18 years or older	
The individual will have to meet a Medicaid Deductible (Spend-Down) to qualify for benefits	NO - If you are eligible for Medicaid and your income is below the limit, you will not have a spend-down if you enroll in PACE, but you cannot	NO - If you are eligible for Medicaid and your income is below the limit, you will not have a spenddown if you enroll in MI Choice, but you	YES - If you have a Medicaid Spend-Down (like a deductible), you must meet or incur your deductible before a payment can be made to your provider.	NO – But the majority of income becomes a monthly co-pay for care. However, income can be diverted to a spouse living in the community.	

	spend-down to qualify if over special income limit.	cannot spend-down to quality if over the income limit.			
Enrollment Start Date	PACE eligibility is confirmed and enrollment paperwork completed by the 24th, then PACE is active the first day of the next month.	No sooner than the date of the MI Choice assessment. Can be any day of the month, unless transferring from another long-term care program.	If eligible, the start date depends on when the application is received in the DHHS office and when the medical provider certifies a need on the required form.	Can start anytime	
Disenrollment Rules	Disenrollment occurs on the last day of the month. Common reason for disenrollment: ● Death ● Client request ● Loss of Medicaid ● Eligibility criteria no longer met ● Must be able to live safe in the community ● Enrollment in another Medicaid Long term care program ● Move out of state	Disenrollment can occur any day of the month. Common reasons for disenrollment: ● You are admitted to a nursing facility ● Death ● You no longer meet eligibility criteria ● You have been in a hospital for 30 days or more ● You chose another Medicaid long-term care program ● Move out of state	Disenrollment can occur any day of the month. Common reasons for disenrollment: ● Death ● Client request ● Loss of Medicaid ● Admitted to a nursing facility or enrolled in PACE or MI Choice/Project Choices ● Move out of state ● You no longer meet the eligibility criteria	● Death ● Client request ● Loss of Medicaid ● Move out of state ● You no longer meet the eligibility criteria	
Covers Acute, Chronic, and Long Term Care needs	YES - Services can be provided at home, throughout PACE contracted network* and PACE centers. *Contracted network includes many other community-based providers, including hospitals, specialists, nursing facilities, ambulances, dialysis, durable medical equipment, physical therapy and many more.	Yes – Services are needs based. Some participants may be eligible for MiChoice Nursing.	No – Medical care services are not included. *If eligible for services, the Home Help program will pay a provider to assist you with activities of daily living and instrumental activities of daily living at home based on the assessment. You must require physical assistance with at least one activity of daily living.	YES	

Services Available	All Medicare and Medicaid covered services. Services are needs-based and may include any of the following services: ● Personalized plan of care created, services provided and monitored by a 11 multidisciplinary PACE team ● 24/7 medical staff with access to full medical records ● One-stop, coordinated care with preventive nursing services ● Assist with Medicaid applications and recertification ● No cost sharing for IDT / PACE physician approved prescriptions and home delivery ● In-home clinical (nursing) and nonclinical support and services (chore services) Adult day program on-site with activities, outings and memory care ● Door-through Door transportation to PACE	All services are needs based and may include: ● Personalized Plan of Care ● Ongoing case coordination and monitoring by a multidisciplinary team ● In home support with tasks of daily living (personal care, housekeeping, meal preparation, etc.) ● Community transportation services ● Adaptive/specialized medical equipment and supplies (Personal Emergency Response System) ● Respite ● Home Delivered Meals ● Private Duty Nursing ● Mental Health Counseling ● Adult Day Health ● Licensed Residential setting (Adult Forster and Homes for the Aged) ● Training Services (for client and/or caregivers) ● Environmental Accessibility Adaptations	Assistance with the following: ● Bathing ● Dressing ● Grooming ● Toileting ● Eating or Feeding ● Transferring ● Mobility ● Medication ● Housework ● Laundry ● Shopping ● Meal Preparation ● Complex Care ● Provide information, referrals and resources	Long Term Care ● 24-hour skilled nursing ● Room (inc. linens and towels) ● Meals/snacks ● Therapeutic Activities ● Social Work ● Restorative Nursing services ● Housekeeping ● Assistance with scheduling any outside appointments ● End of Life care ● Physician services, dental services, podiatry services, Medications, any needed DME, audiology services, and ophthalmology services are all run through the resident's insurance. If the resident has a co-pay for these items at home, they have the same co-pay at a facility.	

	center with assistance as needed ● Coordinate, schedule and transport to medical appointments with assistance as needed ● Adaptive medical equipment and supplies (Personal Emergency Response System) ● Behavioral health / counseling services / social work services ● Nutritional counseling, meal preparation and home delivered meals ● Urgent, primary and specialty care with on-site clinic ● End of life care ● Respite ● Dental, vision, hearing and foot care *Other than emergency services, all services must be provided or authorized by PACE *May be responsible for costs of unauthorized or out of-network services	● Coordination of care with other medical providers			
Where can services be provided?	● Home ● PACE Center ● Other Community based settings	● Home ● Qualified Adult Foster Care Homes	● Home	Long Term Care services can be provided at Medicaid participating skilled nursing facilities	

	• Nursing Facility • Hospitals	• Qualified Homes for the Aged • In the community			
Administering Agency **For Ingham, Eaton and Clinton Counties**	**Senior CommUnity Care** 517-319-0700	**Tri-County Office on Aging** 517-887-1440	**MDHHS** Ingham 517-887-9652 Eaton 517-543-0860 Clinton 517-775-8876	For a list of current local facilities visit: https://www.tcoa.org/resources/nursing-facilities/	