

**STATE OF NEW JERSEY
DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF AGING AND COMMUNITY SERVICES**

GLOBAL OPTIONS (GO) for LONG-TERM CARE

WHAT IS THE GO WAIVER PROGRAM?

Effective January 1, 2009, the Department of Health and Senior Services (DHSS) received approval from the U.S. Centers for Medicare and Medicaid Services to consolidate three Medicaid-supported home and community-based service programs currently operated by DHSS into a single program known as Global Options (GO) for Long Term Care.

The consolidation improves access to a wider range of in-home long-term supportive services for a greater number of seniors and adults with physical disabilities who meet the income, asset and nursing facility level of care requirements established by Medicaid. GO participants will have the options to hire and direct their own service providers.

The move to GO gives care managers greater flexibility in modifying individual care plans as needs and preferences change over time. It also simplifies administrative processes for federal, state and local officials. Through GO, these individuals will have easier access to important home and community-based services.

Federal approval of GO furthers efforts initiated by Governor Corzine to make the state's long-term care system more flexible and consumer-friendly. In 2006, he signed into law the Independence, Dignity and Choice in Long-Term Care Act that required, among other provisions, the rebalancing of Medicaid long-term care funding to improve support for in-home services

GO is designed to supplement – not replace – the assistance already being provided by family, friends and neighbors. By providing a flexible package of services and supports, the new program strengthens the ability of caregivers to continue in their vital role as primary support providers.

GO participants work with a care manager to create an individualized plan of care based on a comprehensive assessment of the participant's healthcare needs. Once the plan of care is approved, community-based services are put in place and monitored to ensure quality and effectiveness.

Seniors, adults with physical disabilities and their caregivers seeking information and access to GO, as well as other state-funded or private pay home and community-based long-term care services, can do so by calling their local Area Agency on Aging toll-free at 1-877-222-3737, or by visiting the Division of Aging and Community Services' website at nj.gov/health/senior/.

WHO IS ELIGIBLE FOR GO?

A GO individual is a person who is assessed by a State community choice counselor or an Aging and Disability Assessor as clinically and financially eligible for Medicaid nursing facility level of care. An applicant must be 65 years or older or between the ages of 21 and 64 who shall be determined disabled* by Social Security Administration (SSA) or determined disabled* by the Division of Medical Assistance and Health Services, Disability Review Section, and there is a reasonable indication that the recipient might need the level of care provided in a hospital, a nursing facility or an intermediate care facility in the near future (that is, a month or less) unless he or she receives home and community-based services.

*Individuals between the ages of 21 and 64 who are receiving active treatment for mental illness or the mentally retarded or the developmentally disabled are ineligible for GO.

WHAT SERVICES MAY BE PROVIDED?

GO participants are eligible for all New Jersey Title XIX Medicaid State Plan services authorized in a Plan of Care. To participate in GO, enrollees must receive Care Management services and one additional waiver service. Based upon the person's assessed level of care needs, the participant can choose among a wide selection of services, which may include:

- Assisted Living/Adult Family Care
- Respite Care
- Home Based Supportive Care
- Environmental Accessibility Adaptations
- Personal Emergency Response Systems (PERS)
- Home-Delivered Meal Service
- Caregiver/Participant Training
- Social Adult Day Care
- Special Medical Equipment and Supplies
- Chore Service
- Care Management
- Transition Services and Transitional Care Management
- Transportation
- Attendant Care

ARE THERE LIMITS TO GO SERVICES?

Yes. The service package is based on an assessment of the individual's level of care needs and is developed in collaboration with a care manager. The service package builds on available supports, and takes into consideration the individual's functional abilities, personal goals and preferences, risk factors, and availability of services.

WHO PROVIDES THESE SERVICES?

Services may be provided by traditional Medicaid community agencies, new qualified non-traditional entities, or qualified Participant-Employed Providers (individuals hired by the participant). All service providers must demonstrate competence in the service to be provided and must meet qualification requirements, which have been approved by the federal government.

The Participant-Employed Provider service option allows a participant to work collaboratively with his/her care manager to employ his/her own provider and direct his/her own care. Prior to participating in the Participant-Employed Provider option the care manager will discuss the responsibilities and complexities to ensure that this option is appropriate.

IS THERE A COST SHARE FOR GO NFT?

There is no co-pay for GO except for the Assisted Living or Adult Family Care service. For those services, a person is always responsible to pay room and board fees. Those participants with income above the SSI (Supplemental Security Income) amount may have a cost share, based upon his or her gross monthly income and allowable deductions. The Care Manager calculates the cost share.

FOR ADDITIONAL INFORMATION CONTACT:

Your Local Area Agency on Aging at 1-877-222-3737