Maintaining Medicaid Eligibility
when in Shared Living Out-of-State Guidelines
July 2019

Purpose
This document provides information to assist individuals who receive Vermont Developmental Disabilities Home and Community-Based Services (HCBS) funding and who live out-of-state for the purposes of receiving services in a Shared Living home which is contracted and overseen by a Vermont developmental disabilities service provider. Necessary documentation must be provided in order to retain a person’s Vermont Medicaid and Supplemental Security Income (SSI).

Specifically, this document outlines the process for informing the Social Security Administration (SSA) and the Long-Term Care (LTC) Benefit Program Specialists at the Department of Vermont Health Access (DVHA) with the required information when someone is in one of these out-of-state living arrangements.

This document also provides information on how living out-of-state affects a person’s benefits and what to report to DVHA and SSA when a person moves permanently within Vermont or to another state.

Premise

1. A person must be enrolled in Vermont Medicaid in order to receive Developmental Disabilities HCBS funding in Vermont.
2. A person cannot receive Medicaid from more than one state at any given time.
3. In order for SSA to consider a person, by their definition, “living out-of-state for the purposes of receiving treatment,” the person needs to be in the SSA designated Living Arrangement: “Custodial Care Family Home – State Code H” (i.e., Shared Living).

A person may retain his/her Vermont residency status and may continue to be a Vermont Medicaid recipient and receive the full SSI amount (including the Vermont portion) when the person receiving Developmental Disabilities HCBS funding is in an out-of-state living arrangement for:
   1. “treatment purposes” – meaning receiving paid supports in a Shared Living home located over the NH, MA or NY border; or
   2. on a trial visit or extended temporary visit to another state.

Note: People receiving specialized treatment in an out-of-state Medicaid facility (such as for Prader Willi Syndrome) may also qualify for residency status exemption. However, that is a different process and not addressed here.
What to Report when Moving into a Shared Living Home Out-of-State

If a person is living out-of-state under these conditions, the following entities must be notified. It is critical these three notifications are made to avoid a person being at risk of losing his/her Vermont Medicaid.

1. District Social Security Administration (Burlington, Montpelier or Rutland office)  
   Ask for the person’s caseworker (SSA residency code must be “Vermont”).
2. Department of Vermont Health Access – Member Services – call 1-800-250-8427  
   The representative will either make the necessary changes or transfer you to the district Long Term Care Benefits Program Specialist.
3. Developmental Disabilities Services Division  
   The DA/SSA must complete the “Living Out-of-State Report Form” and submit it to the DDSD Program Tech (contact information on form). The Program Tech will document the information and notify DVHA Long Term Care Assistant Operations.


Information that needs to be reported when a person moves to a Shared Living home out-of-state:

- Name of Designated Agency/Specialized Service Agency  
- Name of individual reporting  
- Date form submitted  
- First and last name of the person living out-of-state  
- Social Security number  
- Date of birth  
- Last permanent address – town where the person lived prior to the move  
- Date of move  
- Residency address in Vermont – name and address of the person or agency responsible for receiving mail from DVHA on behalf of the individual. This will be considered the Vermont address where the person is maintaining Vermont residency and is usually the address of the person’s representative payee. If the representative payee lives outside of Vermont or the person is their own payee, for the purposes of reporting to SSA, use the developmental disabilities services provider address. In these circumstances, the service provider must share the information from DVHA with the person’s representative payee.  
- Physical address – address of where the person is living out-of-state and the name of the Shared Living provider.

These notifications must be made prior to the person moving, or if unable to do so, immediately after the person moves. If mail is returned to DVHA with an out-of-state address, DVHA will close the person’s Vermont Medicaid as soon as possible unless DVHA has been notified of the person’s out-of-state living arrangement status.

Information that needs to be reported when a person returns to Vermont from a Shared Living home:

- Person’s first and last name  
- Social Security number  
- Date of birth  
- State where the person had been living  
- Date the person moved back to Vermont  
- Mailing address in Vermont where the person is living
Note: If at any point the person becomes a resident of another state, Vermont Developmental Disabilities HCBS must be discontinued and the “Living Out-of-State Reporting Form” submitted with the date of change in residency and physical out-of-state address.

What to report to DVHA – Long Term Care when living out-of-state for “Treatment Purposes”

As noted above, when someone is placed out-of-state in a Shared Living home, DVHA needs to know if the address they have on record must change. Ultimately, the address should be where review applications and other DVHA notices are sent. The representative payee is responsible for all mail sent from DVHA, so if a person’s authorized representative is someone other than a person’s representative payee, then the payee needs to forward all notices and applications to the authorized representative.

During the period when a person is living out-of-state, it is important DVHA knows of the move and that it is for “treatment purposes”. When an annual DVHA eligibility form is completed, the person’s Vermont mailing address (that of the representative payee or provider agency) should be provided as the person’s Vermont residence. Enclose a note explaining the person is living out-of-state for “treatment purposes” but Vermont residency is being maintained. The following is a sample note to send to DVHA:

“[Person’s name with SSN and DOB] was living in [name of town of last permanent address] but is now currently receiving treatment at [out-of-state address] as of [move date] but remains a Vermont resident of [address of payee].”

Send the notice to:
Application and Document Processing Center
280 State Drive
Waterbury VT 05671-1500

DVHA must also be notified if, and when, the person moves back to Vermont. If you have questions, contact DVHA Member Services (1-800-250-8427).

What to report to DVHA for other moves or visits out-of-state

Temporary Move Out-of-state for Trial Visit or Extended Vacation

It is not necessary to report someone who is going out-of-state for a short trip or visit if they have the intent to return. However, if a person is going out-of-state for an extended stay (e.g., spending the winter in Florida), DVHA must be notified. The following is a sample note to send to DVHA:

“[Person’s name with SSN and DOB] will be out of Vermont from [date leaving] to [date returning]. [Person’s name] is not moving, but is visiting [name of state].”

Send the notice to:
Application and Document Processing Center
280 State Drive
Waterbury VT 05671-1500

If a person is on a temporary absence for a full calendar month, the Social Security Administration (1-800-479-6151) must be notified to report the change.
Permanent Move within Vermont

If a person is moving permanently within the state of Vermont, contact DVHA Member Services (1-800-250-8427) to report the change in address.

If a person makes a permanent move within the state, the Social Security Administration (1-800-479-6151) must be notified to report the change.

Permanent Move Out-of-state

A person may not maintain his/her Vermont residency when he/she moves permanently and becomes a resident of another state and no longer receives funding and services from a Vermont service provider. A person needs to apply for Medicaid in the new state and discontinue Vermont Medicaid. As noted above, if a person is permanently moving out-of-state and ending his/her Vermont residency, contact the DVHA Member Services at 1-800-250-8427 to report the change in address.

If a person makes a permanent move out-of-state, the Social Security Administration (1-800-479-6151) must be notified to report the change.

How Visiting or Living Out-of-State Affects Benefits

Whenever someone receiving Medicaid leaves the state of Vermont for any reason, it is important to be aware of the limitations of Vermont Medicaid insurance. For example, many doctors, hospitals, pharmacies and other medical providers outside of Vermont are not enrolled as Vermont Medicaid providers and therefore cannot accept Vermont Medicaid as payment unless they are willing to enroll as a Medicaid provider. The following are steps that can be taken to increase the likelihood of insurance coverage.

1. Plan in advance to have sufficient medication on hand when going out-of-state.

2. Check with medical providers in the state where the person will be living or visiting to see if they are Vermont Medicaid providers. Many providers in towns bordering Vermont accept Vermont Medicaid, but some do not.

3. If a medical provider is not enrolled as a Vermont Medicaid provider, ask if they are willing to enroll. To enroll, the out-of-state provider must contact DXC Technology (1-802-878-7871).

4. If the person needs emergency or unexpected medical care from a provider who is not enrolled in Vermont Medicaid, the medical provider can enroll as a Vermont Medicaid provider after treatment is provided and bill Vermont Medicaid for that treatment.

If you have questions regarding this notice, please contact:

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