

Kyhealth Choices Chfs

ELIGIBILITY REQUIREMENTS FOR KYHEALTH CHOICES

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Developed by the Kentucky Cabinet for Health and Family Services
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UNDERSTANDING KYHEALTH CHOICES CHFS: A COMPREHENSIVE GUIDE TO KENTUCKY’S LONG-TERM CARE PROGRAM

Navigating the landscape of long-term care can be overwhelming for individuals and families across Kentucky. The state’s commitment to providing health coverage for vulnerable populations is embodied in the Kentucky HEALTH (Helping to Engage and Achieve Long Term Health) initiative. At the heart of this initiative lies the **Kyhealth Choices Chfs** program, a vital component administered by the Kentucky Cabinet for Health and Family Services (CHFS). This article provides a thorough exploration of what Kyhealth Choices Chfs entails, how it serves residents, and why understanding it is essential for anyone seeking long-term care support in the Bluegrass State.

Whether you are an older adult, a person with a disability, or a family caregiver, the program offers a pathway to receive necessary services while maintaining as much independence as possible. Below, we break down the structure, eligibility, application process, benefits, and frequently asked questions about Kyhealth Choices Chfs.

WHAT IS KYHEALTH CHOICES CHFS?

Kyhealth Choices Chfs refers to the managed long-term services and supports (MLTSS) program within Kentucky’s Medicaid expansion known as Kentucky HEALTH. CHFS, the state agency responsible for administering health and social services, oversees the program. The “Choices” component specifically targets individuals who need assistance with daily living activities due to aging, chronic illness, or disability.

Unlike traditional fee-for-service Medicaid, Kyhealth Choices Chfs operates through managed care organizations (MCOs). These MCOs coordinate care to ensure that members receive appropriate services in the most integrated setting possible. The program aims to promote person-centered planning, allowing recipients to have a say in their care while controlling costs for the state.

Key Objectives of the Program

- Provide access to home- and community-based services (HCBS) to delay or prevent institutionalization.
- Support family caregivers through respite and training programs.
- Integrate physical health, behavioral health, and long-term care under one coordinated plan.
- Empower members to choose where and how they receive care.

By focusing on these objectives, Kyhealth Choices Chfs helps thousands of Kentuckians live with dignity and comfort in their own homes or community settings, rather than in nursing facilities.

CHFS

To qualify for the **Kyhealth Choices Chfs** program, applicants must meet specific criteria set by the Kentucky Cabinet for Health and Family Services. Eligibility is determined through a combination of financial and functional assessments.

Financial Criteria

1. **Income Limits:** Applicants must have income at or below 150% of the Federal Poverty Level (FPL) for their household size. For 2025, this generally means a monthly income cap of around \$1,732 for a single individual.
2. **Asset Limits:** Countable resources must not exceed \$2,000 for an individual (excluding primary home, one vehicle, and certain personal property). Some assets are exempt, but applicants should consult with a CHFS caseworker for specifics.
3. **Medicaid Enrollment:** Individuals must already be enrolled in or eligible for full Medicaid coverage under Kentucky HEALTH.

Functional Needs Assessment

Beyond finances, the program requires that an individual demonstrate a need for nursing facility level of care. This is evaluated using the Commonwealth of Kentucky’s Level of Care (LOC) assessment tool. The assessment considers the applicant’s ability to perform Activities of Daily Living (ADLs) such as bathing, dressing, eating, toileting, transferring, and mobility. Cognitive impairments and medical needs are also weighed.

Eligible members typically require substantial assistance with at least two ADLs or have significant cognitive or behavioral challenges that necessitate supervision and support.

SERVICES COVERED UNDER KYHEALTH CHOICES CHFS

Once enrolled, members gain access to a broad array of long-term services and supports tailored to their individual needs. The **Kyhealth Choices Chfs** program prioritizes home- and community-based services (HCBS) but also provides nursing facility care when necessary.

Home- and Community-Based Services (HCBS)

- **Personal Care Assistance:** Help with bathing, grooming, dressing, toileting, and other daily activities.
- **Homemaker Services:** Light housekeeping, laundry, and meal preparation.
- **Respite Care:** Temporary relief for family caregivers, provided in the home or at an adult day center.
- **Adult Day Health Services:** Structured programs offering social activities, health monitoring, and therapy.

- **Home Health Services:** Skilled nursing, physical therapy, occupational therapy, and speech therapy.
- **Medical Equipment and Supplies:** Wheelchairs, walkers, hospital beds, incontinence supplies, and more.
- **Home Modifications:** Ramps, grab bars, widened doorways, and other safety improvements.
- **Transportation:** Non-emergency medical transport to appointments and community activities.

Nursing Facility Services

If a member's needs cannot be safely met at home, the program covers long-term care in a licensed nursing facility. However, the program's philosophy is to support community living whenever possible. Members receive case management to explore all alternatives before moving to a facility.

HOW TO APPLY FOR KYHEALTH CHOICES CHFS

The application process for **Kyhealth Choices Chfs** involves several steps, all coordinated by CHFS and the MCOs. Below is a practical guide to getting started.

Step 1: Determine Preliminary Eligibility

Before applying, individuals should review the financial criteria and gather necessary documents, including income verification (pay stubs, Social Security award letters, pension statements), asset statements (bank accounts, investment records), and proof of Kentucky residency. CHFS provides a pre-screening tool on its website, or you can call the Kentucky HEALTH helpline for guidance.

Step 2: Submit a Medicaid Application

Applicants who are not already on Medicaid must apply through the Kentucky Benefind portal or by contacting their local Department for Community Based Services (DCBS) office. Once approved for Medicaid, they can request a functional assessment for long-term care.

Step 3: Complete the Level of Care Assessment

A nurse or social worker from CHFS or the MCO will perform an in-person or telephonic assessment. The assessor will evaluate the applicant's physical and cognitive abilities, medical conditions, and support system. Based on the results, the individual is certified as needing nursing facility level of care, which qualifies them for the Choices program.

Step 4: Enroll in an MCO and Develop a Care Plan

Kentucky HEALTH members must choose a managed care organization (such as Aetna Better Health of Kentucky, Anthem Blue Cross Blue Shield, Humana Healthy Horizons, or Passport Health Plan). The MCO assigns a care coordinator who works with

the member and family to create a personalized plan of care. This plan outlines the specific services, providers, and goals for the member's long-term well-being.

THE ROLE OF CHFS IN KYHEALTH CHOICES CHFS

The Kentucky Cabinet for Health and Family Services (CHFS) plays an oversight and administrative role in the program. CHFS sets policy, contracts with MCOs, monitors quality of care, and handles appeals and grievances. Understanding how CHFS operates can help members navigate issues such as denial of services or changes in eligibility.

CHFS also operates the Kentucky Healthcare Infrastructure Authority (KHIA) and works closely with local area agencies on aging and disability resource centers. These partnerships ensure that information and support are available at the community level.

FREQUENTLY ASKED QUESTIONS ABOUT KYHEALTH CHOICES CHFS

What is the difference between Kentucky HEALTH and Kyhealth Choices Chfs?

Kentucky HEALTH is the state's broader Medicaid reform program, which covers acute care (doctor visits, hospital stays, prescription drugs) for most low-income adults. Kyhealth Choices Chfs is a specialized component of Kentucky HEALTH for individuals who need long-term services and supports. Not all Kentucky HEALTH members are enrolled in Choices; only those who meet the level of care criteria qualify.

Can I choose my own caregivers under this program?

Yes, within certain guidelines. The program supports self-directed care, allowing members to hire family members (excluding spouses in most cases) or friends as paid caregivers. This flexibility helps individuals maintain familiar relationships while receiving assistance.

Is there a waiting list for Kyhealth Choices Chfs?

Unlike some states that have waiting lists for HCBS waivers, Kentucky operates its Choos program as part of the managed care system. If you are eligible and enrolled in an MCO, services should begin promptly after your care plan is approved. However, availability of certain providers (like home health agencies) may vary by region, so early planning is recommended.

What if my application is

denied?

If CHFS or the MCO denies your application for Kyhealth Choices Chfs, you have the right to appeal. The first step is to request a fair hearing within 90 days of the denial notice. You can contact the CHFS Office of Inspector General for help. Legal aid organizations and Kentucky's Long-Term Care Ombudsman program can also assist with appeals.

BENEFITS OF KYHEALTH CHOICES CHFS FOR FAMILIES AND INDIVIDUALS

Enrolling in the **Kyhealth Choices Chfs** program offers numerous advantages beyond basic coverage. These benefits are designed to improve quality of life for members and reduce strain on family caregivers.

- **Person-Centered Planning:** Members and their families actively participate in choosing goals, services, and providers.
- **Care Coordination:** A dedicated care manager helps navigate the healthcare system, schedules appointments, and ensures continuity.
- **Cost Savings:** By supporting home-based care, the program saves the state money and helps families avoid catastrophic out-of-pocket expenses for long-term care.
- **Peace of Mind:** Knowing that professional support is available 24/7 through the MCO helpline provides reassurance.
- **Integration of Services:** Mental health, substance use treatment, and physical health are managed under one umbrella, reducing fragmentation.

CHALLENGES AND CONSIDERATIONS

While Kyhealth Choices Chfs is a valuable resource, some challenges exist. For instance, finding qualified home care aides in rural areas can be difficult. The MCOs must maintain adequate networks, but patients may face travel distances. Additionally, the application process requires patience and attention to detail. Families should keep copies of all documents and follow up regularly with CHFS or the MCO.

Another consideration is that the program is subject to annual federal approvals and state budget decisions. Any changes in policy could affect eligibility or covered services. Staying informed through CHFS updates and advocacy groups like AARP Kentucky or the Kentucky Association of Area Agencies on Aging is wise.

CONCLUSION

The **Kyhealth Choices Chfs** program represents Kentucky's commitment to helping its most vulnerable residents receive long-term care with dignity and choice. By blending Medicaid managed care with home- and community-based supports, CHFS has created a system that prioritizes independence, family involvement, and quality of life. Understanding eligibility, services, and the application process empowers individuals and families to make informed decisions about their care.

If you or a loved one may benefit from this program, do not hesitate to contact your local DCBS office or visit the Kentucky HEALTH website. With proper planning and support, Kyhealth Choices Chfs can be the bridge to a more secure and fulfilling future.