

Medicaid Nursing Home Information



Utah Nursing Homes & Intermediate Care Facilities for
people with Intellectual Disabilities (ICF/ID)



UTAH DEPARTMENT OF
HEALTH
MEDICAID



DEPARTMENT OF
**WORKFORCE
SERVICES**

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WHAT IS MEDICAID?

Medicaid is a health benefit program for families and individuals who are eligible. See [What is Medicaid? brochure for general information about Medicaid](#). This pamphlet gives some of the rules of the Utah Long Term Care Medicaid program. When this pamphlet refers to nursing homes it is also referring to Intermediate Care Facilities for people with Intellectual Disabilities (ICF/ID).

Medicaid rules are not always the same in each state. If you need to know about Medicaid in another state, you will need to contact a worker in that state.

To apply for Utah Medicaid or get answers to your questions, you need to talk to a Nursing Home Medicaid worker. The people who work in the nursing home can tell you the name and telephone number of the Medicaid worker assigned to them or you can call 801-526-0950 in the Salt Lake area, or 1-866-435-7471 anywhere in Utah. You can also apply online at: jobs.utah.gov/mycase

WHO IS ELIGIBLE?

Medicaid will help pay for nursing home care for those individuals who are financially and medically eligible.

Financial: A Medicaid worker will determine if you are financially eligible for Medicaid. You will need to provide proof of your income (Social Security, retirement, veterans benefits, etc.) and your assets (bank accounts, property, stocks, cash on hand, etc.)

Medical: Your doctor and the nursing home will provide information about your health to the Department of Health. You must let the nursing home know you are applying for Medicaid as soon as possible.

Both of these steps must be done before Medicaid can help with nursing home costs.

HOW DO I APPLY?

The first step to becoming eligible for Medicaid is to complete an application. You may apply in person at any Department of Workforce Services location, by mail, by fax or online at: jobs.utah.gov/mycase

You will need to verify information about you and your spouse. You may be asked to provide a copy of the items listed below. If you need help with these proofs please ask a Medicaid worker.

- Proof of identity and citizenship—such as a passport or a driver’s license and a certified birth certificate; naturalization papers or other proof of identity and citizenship status; Medicare claim number and health insurance card.
- Proof of total income for you and your spouse.
- Proof of assets owned by you and/or your spouse including assets in which you and/or your spouse are a joint owner, signer or trustee.
- Copies of medical bills you owe or have just paid.

See the back of this booklet for more information or questions on how to apply for Medicaid.

DATES OF MEDICAID COVERAGE

Medicaid eligibility is decided one month at a time. Depending on changes of your income, assets, etc. you may be eligible during one month and not eligible during another month.

PAST MEDICAL BILLS

Income deductions: If your past bills are not covered by Medicaid or other insurance, you may be able to get a deduction for past medical bills you still owe. Please ask your worker about help for past medical bills.

WHAT IS COVERED BY MEDICAID?

Before you go to a doctor, pharmacy, hospital or other medical provider, ask if they accept Medicaid for payment. If they do not accept Medicaid you may have to pay for your services.

Nursing home — ICF/ID

- Non-prescription pharmacy items
- Dietary supplements
- Transportation to medical appointments
- Medical supplies
- Room and board
- Nursing care

People in ICF/ID facilities receive additional services such as employment training, counseling and support therapy, recreational activity training (eating in restaurants, going to movies, shopping in malls, etc.)

Hospital

- Inpatient and outpatient hospital care
- Physical therapy services
- Pharmacy
- Laboratory
- X-Ray

Other services

- Limited dental services
- Oxygen
- Emergency ambulance service
- Doctor visits
- Prescription drugs (reviewed if over 7 per month)
- Most medical supplies
- Limited vision coverage
- Limited podiatry

Effective January 1, 2006 prescription drugs for Medicare eligible clients will no longer be covered by Medicaid.

MEDICAID NURSING HOME RESIDENT INCOME

The amount Medicaid pays on your nursing home cost depends on your income. You may be required to help pay the monthly costs.

We look only at your income. If you have a spouse at home, we will see if your spouse can keep some of your income.

You must report any changes to income you and your spouse receive, such as cost-of-living changes, cash gifts, or new sources of income. You must let your worker know about changes as soon as they happen.

If you get Medicaid, you must apply for any income you might be eligible to receive. This includes, but is not limited to: Veteran's Benefits, Social Security, Worker's Compensation, sick pay, mortgage or paycheck insurance, Unemployment Compensation, child support or alimony, life insurance, or retirement benefits. You do not have to apply for Supplemental Security Income (SSI).

If you are on Medicare, we will pay your Medicare Part B premium after you are approved for Medicaid. Your Social Security check will increase by that amount. It takes about three months, but you will receive a refund check from Medicare for the money that was held out for the months you were on Medicaid. Call your worker if you have questions.

INCOME DEDUCTIONS

The amount you pay the nursing home may be reduced by allowable deductions. Examples of allowable deductions include:

Personal needs: You may keep \$45 of your monthly income for personal needs such as a haircut or clothing.

Medical insurance: You can keep enough money to pay for your health insurance.

Medical bills: If you owe medical bills that are not covered by Medicaid, you may be able to get an income deduction for them.

Spousal deduction: Your spouse may be able to keep part of your income. This depends on the income and expenses of your spouse.

Earned income deduction: The first \$125 of monthly earned income does not count.

Veteran's aid and attendance: If you are a veteran or surviving spouse of a veteran, you may be able to keep extra money for personal needs.

WHEN YOU HAVE A SPOUSE AT HOME: INCOME

If you are in a nursing home and your spouse is at home, your spouse at home may be able to keep part of your income. The amount your spouse can keep depends on their income.

Family members: A dependent family member who lives with your spouse may rely on you for support. Your spouse may be able to keep some of your income to help pay for the dependent's needs.

Hearings: If your spouse needs more income than we have allowed, you can ask for a hearing. Your Medicaid worker can tell you how.

MEDICAID NURSING HOME RESIDENT ASSETS

Your assets must not exceed \$2,000 to qualify for Medicaid each month. If you are married and your spouse lives at home, your spouse may be able to keep half of your combined assets.

An asset is personal or real property that has a value. Examples: bank accounts, cash, homes or real estate annuities, livestock, water shares, life insurance, funeral plans, vehicles, etc. Include things you own or have a part interest in. Some assets are not counted in the \$2,000.

First moment of the month rule: Any asset you have on the first moment of the month is a countable asset. This is true even if you owe it to someone else.

Income is never counted as an asset in the month you receive it. For example, the Social Security check you get for a month is income for that month and is not counted as an asset. It becomes an asset if it is still in your account on the first day of the next month.

EXEMPT ASSETS

Home: Your home located in Utah* may not count as an asset if:

- You intend to return to the home, or
- Your doctor reports that you will need nursing home care for less than six months, or
- Your spouse or a relative who lives in the home and relies on you for money, medical help or any other reason.

If the equity in your home is over a certain amount you are not eligible for long term-care Medicaid unless your spouse or a minor or disabled child lives in the home.

*If your home is not in Utah, it can be exempt only if you have a spouse or relative living in it that relies on you.

Vehicles: The value of one vehicle can be exempt. The equity value of other vehicles may count as an asset.

Life insurance: The cash value of your life insurance counts as an asset, unless the combined total face value of all policies is \$1,500 or less. Dividends earned by life insurance policies will count as an asset.

Funds set aside for funeral:

- Irrevocable trusts or irrevocable prepaid funeral plans.
- Your own money set aside for funeral, up to \$1,500. It must be separate from other funds and identified for burial.
- Items for burial (cemetery plot, casket, vault or urn). These items must be fully paid.

Household and personal items: Household goods are items needed for the maintenance, use and occupancy of your home. The furnishings, appliances, and other personal items in your

home normally do not count against the \$2,000 Medicaid asset limit. Items held because of their value or as an investment are countable assets.

TRANSFER OF ASSETS

If you transfer assets to someone for less than they are worth, you may be sanctioned. A sanction means that you will not be eligible to have Medicaid pay for your nursing home and long term care services. If this happens, you may still be eligible for Medicaid to pay for other costs. The length of the sanction depends on the value of the assets you transferred and when the asset was transferred.

You must report all assets transferred in the 60 months prior to the date of your Medicaid application

EXEMPT TRANSFERS

The following transfers will not affect your eligibility for nursing home and long term Medicaid.

1. Transfer of a home or any other asset to your spouse.
2. Transfer of any asset to a blind or disabled son or daughter or to a trust established for the sole benefit of a blind or disabled son or daughter.
3. Transfer of a home to a son or daughter under 21 years of age.
4. Transfer to a trust set up for the sole benefit of a person who is blind or disabled and who is under age 65.
5. Transfer of a home to a brother or sister who is part owner of the home and who has lived in the home for at least one year just before you enter a nursing home.
6. Transfer of a home to a son or daughter who has done all of the following:
 - a. Lived in the home, and

- b. Provided care to the parent so the parent could remain at home instead of a nursing home, and
- c. Done so for at least two years just before the parent enters the nursing home.

WHEN YOU HAVE A SPOUSE AT HOME: ASSETS

If you are in a nursing home and your spouse is at home, your spouse can keep up to half the assets with a minimum and maximum. A spousal assessment is done to find out how much of your assets your spouse can keep. The assessment is a listing of the assets of a married couple as of the date one of them enters a nursing home or other medical institution for a stay of 30 days or longer. All countable assets are listed. It does not matter who owned the assets before the marriage, or how long the couple has been married, or which spouse's name they are in now. Medicaid is concerned only with the **total** value of all the countable assets of the married couple.

We divide the total value by two to get each spouse's share. Your spouse's share (1/2 of the assets) is an amount that does not change. At the time you are asset eligible for Medicaid, the amount of total assets your spouse can keep cannot be more than the spousal share or the minimum or maximum resource standard in effect for that year. Your assets can be no more than \$2,000.

After your nursing home Medicaid is approved, your spouse's share of assets must be put in the spouse's name. Your share of the assets (no more than \$2,000) can be in your name. If you have to transfer property from one spouse to another, that must be done before your scheduled review (usually 12 months). Your assets must be less than \$2,000 to remain eligible for Medicaid.

RIGHTS AND RESPONSIBILITIES FOR APPLICANTS

You have the right to:

- Apply for Medicaid at any time.
- Receive help completing the application.
- Know the name of the person working with you.
- Be treated with courtesy, dignity and respect.
- Be asked for information clearly and courteously.
- Be told in writing that your application was approved or denied.
- Be told in writing when any changes are made on your case.
- Ask for a hearing if you don't agree with an action taken on your case.
- Look at any information used to decide your eligibility.
- Look at the policy.

You have the responsibility to:

- Apply for Medicaid by completing and signing an application and verifying all eligibility factors.
- Give complete and accurate information so eligibility can be figured correctly.
- Report any changes as soon as they happen. This includes changes to your income, the income of your spouse, the opening or closing of any bank accounts, getting any new assets, or selling a home. You should also report any changes in your medical insurance coverage.
- Apply for any other benefits you may be entitled to receive.

FREQUENTLY ASKED QUESTIONS

Will Medicaid take away my house?

No. Medicaid does not take away people's houses. But the house may keep you off Medicaid, if it is a countable asset.

Is there a lien on my property?

The law requires states to recover payments made for people on Medicaid, age 55 or older. This recovery will not take place while the client or spouse is living or if there is a dependent or disabled child. We have a pamphlet called *Estate Recovery Information* which gives more information on this recovery. You can get this pamphlet from your Medicaid worker.

Where can I find help in choosing a nursing home?

To find nursing homes in your area visit: [medicare.gov/nursinghomecompare](https://www.medicare.gov/nursinghomecompare). The Medicare website can help you compare nursing homes and find the right facility that fits your needs. See *Your Guide to Choosing a Nursing Home or Other Long-Term Care* booklet: [medicare.gov/pubs/pdf/02174.pdf](https://www.medicare.gov/pubs/pdf/02174.pdf)

What if I pay too much in a month?

You may be eligible for a refund if the amount you pay to the nursing home in a month is more than the amount Medicaid covered for that month. Contact your Medicaid worker if you believe you may have paid too much for any month.

When should I apply for Medicaid?

You should apply as close to the time you enter a nursing home as you can. In most cases, we approve or deny your application within 30 days. **If you need more time to get information back to the Medicaid worker, ask for it.** Medicaid can begin on the first day of the month in which you applied. The date of application for Medicaid is the day we actually receive the signed application forms if before 5:00p.m. If your application is received after 5:00 p.m. the application date will be the next business day. If

you qualify, it can go back 90 days from the date you apply. You can talk to a Medicaid worker any time you have questions, but please call for an appointment first.

**For more information or questions on how
to apply for Medicaid:**

[Medicaid.utah.gov](https://www.Medicaid.utah.gov)

Medicaid Hotline: 1-800-662-9651

To find nursing homes in your area visit:

[Medicare.gov/nursinghomecompare](https://www.Medicare.gov/nursinghomecompare)

**For more information or questions on how
to apply for Medicare:**

[Medicare.gov](https://www.Medicare.gov)

Department of Workforce Services:

Salt Lake County: (801) 526-0950

Toll-free: 1(866) 435-7414

**Department of Health
Department of Workforce Services**

Equal Opportunity Employer/Program

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ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-801-526-0950. 注意：如果您使用繁體中文，

您可以免費獲得語言援助服務。請致電 1-801-526-0950。