Medical Assistance Eligibility
and the
Long Term Care Partnership
in Minnesota

This document is intended to help readers understand:

- General eligibility policy relating to Medical Assistance payment of long-term care services in Minnesota and
- The interaction between Medical Assistance eligibility policy and the Long Term Care Partnership in Minnesota.

Insurance Producers: To sell Long Term Care Partnership policies in Minnesota, insurance producers must successfully complete training that has been approved by the Minnesota Department of Commerce. The training includes basic information about Medical Assistance (MA) eligibility and asset protection as it relates to the Long Term Care Partnership (LTCP). MA eligibility policy is very complex. MA policy incorporates special regulations and exceptions for certain situations, and regulations change when state and federal legislation is amended.

MA regulations vary from state to state. Minnesota rules may not apply in other states.

Due to the complexity of MA in relation to long-term care, do not advise clients about potential MA eligibility or about assets that count for MA or for a community spouse.

Refer your clients to the web or to their county agency for MA information, such as:

- General information about the relationship between MA and LTCP in MN can be found in a brochure entitled "Long Term Care Partnership and Medical Assistance Asset Protection" (DHS-5426). It can be picked up from the county or printed from: ttp://edocs.dhs.state.mn.us/lfserver/Legacy/DHS-5426-ENG
- To see how MA eligibility policy would be applied to their particular circumstances, they would be advised to submit an MA application. The county would review their information and verifications and advise them about potential or future MA eligibility.
- To inquire about the status of a current MA enrollee, written consent must be given by the enrollee or authorized representative for MA.

Training Curriculum Developers: Mandatory training for those who sell LTCP insurance in MN must include all topics in MS 60K.365. Information in this document is intended to help you develop the MA portion of your LTCP training. You need to address the basic elements contained in this document, but do not have to use the information verbatim.

Information in this document is up-to-date as of September 16, 2008.

Introduction to the Long Term Care Partnership

Long Term Care Partnership (LTCP) is a joint effort between the federal Medicaid Program and LTC insurers. LTCP was developed to encourage people to plan for their future Long-term care (LTC) needs, such as residing in a nursing facility or receiving LTC waiver services in a home or community-based setting.

The LTCP involves private LTC insurers, LTC insurance producers (agents and brokers), the Department of Human Services (DHS) and the Department of Commerce. Although the Partnership is overseen by the federal Centers for Medicare and Medicaid Services (CMS), each state has a great deal of autonomy in its administration. In Minnesota, qualified LTCP policies must provide a specific amount of inflation protection based on the person's age when the policy is purchased and must meet other requirements established by state and federal law.

Medical Assistance (MA) is Minnesota's name for the federal Medicaid program. A person who requests MA payment of LTC services after using some benefits of a qualified LTCP policy may protect assets equal to the amount paid by the policy. More detailed information will be provided about the relationship between MA asset eligibility and how assets can be protected by an LTCP policy.

The following pages will provide you with information about:

- General criteria for MA eligibility and for payment of LTC services.
- Income eligibility criteria for people requesting MA payment of LTC services.
- Asset eligibility criteria for people requesting MA payment of LTC services.
- The interaction between MA eligibility and the Minnesota LTCP Program.
- The interaction between LTCP asset protection and other MA rules.
- The application process for Minnesota Health Care Programs.
- General differences in Medicaid eligibility between Minnesota and neighboring states.

General MA Eligibility Regulations

To be eligible for MA, a person must first fit into an eligibility group, then must meet specific requirements relating to residency, citizenship, immigration status, third party liability, income and asset guidelines. General information about each item is included below, with special emphasis on people who reside in a Long-term Care Facility (LTCF) or receive home and community-based services through a waiver program.

MA eligibility groups in Minnesota include the following:

- Children under the age of 21.
- Parents or relative caretakers of dependent children.
- Pregnant women.
- People age 65 or older.
- People who are blind.
- People with a certified disability.
- Women in need of treatment for certain cancers.

People in a LTCF or receiving home or community-based waiver services are generally either certified as disabled or are age 65 or over. They would be eligible for MA benefits if they meet all other requirements, such as those noted below.

MA Residency rules require that a person lives in Minnesota and intends to remain in the state. However, those rules do not necessarily apply to everyone. A person in an LTCF is considered a resident of the state in which he or she was physically present on the date of the MA application. In addition, MN is not considered the state of residence for:

- A child under 18 whose parent or legal guardian lives in another state.
- A person of any age placed in the LTCF by another state.
- A person who resided in North Dakota prior to nursing home admission. (Per an agreement between the two states, the person remains a North Dakota resident for the first 2 years in a Minnesota nursing facility, and vice versa.)

MA Citizenship and Immigration Status rules require a person to be either a U.S. citizen or a non-citizen with a qualified immigration status. The following must be verified:

- U.S. citizenship and identity when a person declares that he or she is a U.S. citizen.
- Immigration status when the person states that he or she has a non-citizen status. Sponsored non-citizens must also provide information about their sponsors.

MA Third Party Liability rules state that MA is the payor of last resort. People must provide information about other payment sources, such as other health insurance, Medicare, long-term care insurance, or a liable third party. The other payment source pays their portion of medical expenses before MA payments are made.

General Criteria for MA Payment of LTC Services

The following information will help you see the complexity of MA eligibility rules that are evaluated for each person's circumstances. To be eligible for MA payment of LTC services in Minnesota, a person must:

- Have a **Long Term Care Consultation (LTCC)** which determines he or she needs a level of care provided in either:
  One of these medical facilities:
  - Nursing facility.
  - Medical hospital.
  - Intermediate care facility for people with mental retardation or related condition (ICF-MR).
  - MA-covered bed in a psychiatric hospital or nursing home.

  Or through
  One of these home and community-based services for elderly or disabled people:
  - Elderly Waiver (EW) program.
  - Community Alternative Care (CAC).
  - Community Alternatives for Disabled Individuals (CADI).
  - Developmental Disabilities (DD) (formerly called Mental Retardation and Related Conditions-MR/RC).
  - Traumatic Brain Injury (TBI).
- Begin receiving LTC services within 60 days of the LTCC.
- Reside in an MA-certified LTCF or receive services under an MA home and community-based waiver services program. This does **not** include placements in facilities that are not Medicaid-certified, such as a Veteran's Administration facility. Also, note that MA does not consider assisted living facilities to be LTCFs. For MA, people in non-Medicaid-certified facilities are considered community residents.
- Have home equity of $500,000 or less. (Note: Special rules apply when home equity is over $500,000 or when the person or certain dependent family members do not live in the home.)
- Disclose any interest in an annuity for self and for spouse, if married. The state must be named as a remainder beneficiary of all annuities owned by the person or spouse.
- Not be in a penalty period for an uncompensated transfer of income or assets. During a penalty period, MA will not pay the cost of LTC services.
  Penalty periods are caused when a person or spouse makes an uncompensated transfer while receiving MA or during a "lookback period" before applying for MA.
  The lookback period is currently 36 months for most uncompensated transfers. Due to the Federal Deficit Reduction Act of 2005 (DRA), the lookback period for all transfers will be increased to 60 months by January 2011.
  A specific formula is used to determine the length of a penalty period.
  The penalty period begin date depends on when the transfer was made. For transfers made before 2/8/06, the penalty begins the month after the month of the transfer. For transfers made on or after 2/8/06, the penalty begins when the person requests MA payment of LTC services and would have been eligible if there was no penalty.

Income Eligibility Criteria for People Requesting MA Payment of LTC Services

People who receive MA benefits do not all have the same income limits or use the same MA budget. A person's MA eligibility group determines the income and budgeting rules, such as the person's:

- Income limits (which are adjusted annually).
- Countable income.
- Excluded income.
- Deductions allowed from total gross countable income.
- Potential MA eligibility if the person's income is over the allowable limit.

This basic budgeting information relates specifically to people in an LTCF or receiving EW services. People who receive home and community-based services through other waiver programs (such as CAC, CADI, DD or TBI) may be eligible for asset protection under the Partnership, but have different MA eligibility rules not addressed in this document. Refer them to their county agencies for information relating to their specific situations.

When looking at MA eligibility, income of just the LTC or EW person is counted in his or her MA-LTC budget. Income of that person's spouse or parent is not counted.

Deductions allowed in an MA budget depend on the person's specific situation, and everyone does not necessarily get the same deductions. General deductions allowed in Minnesota on LTC or EW budgets include:

- Medicare premiums and health insurance premiums not paid by MA.
- An income allocation to a spouse who is living in community and not receiving LTC services if it is determined that the spouse has a financial need.
- Income allocations to certain other family members (subject to very specific limitations).
- Personal needs allowance, which changes annually.
- Home maintenance allowance if a doctor certifies that the person is expected to return to the home in a specific time period.
- Health care expenses that will not be paid by MA or by a third party.

The result of the calculation is the amount that a person must contribute toward the cost of his or her monthly LTC services and is typically paid to the LTCF or EW provider. MA will pay for other covered medical services received by the person.

Asset Eligibility Criteria for People Requesting MA Payment of LTC Services

A person's MA asset limit is determined by his or her eligibility group and household size. In Minnesota, someone in an LTCF or receiving EW services is considered to be an MA household of one with an asset limit of $3,000 in countable assets. People in other eligibility groups or with larger household sizes may have different asset limits.

Excluded assets are not counted towards the MA asset limit. Some excluded assets are one vehicle, some types of trusts, certain funds set aside for burial expenses, some federal payments, household goods, and personal items such as clothing and jewelry. Homestead property is excluded if the person or spouse or certain other family members live there. The homestead is excluded for 6 months from date of permanent LTCF admittance when no spouse or certain other family members live in the home.

Countable assets are available to the person and are counted towards the MA asset limit. Some countable assets are cash, bank accounts, stocks, bonds, non-homestead real property, property agreements like contracts-for-deed, life estate interests, and other liquid assets. The homestead becomes a countable asset 6 months after the person was admitted to the LTCF for a permanent stay when no spouse or certain other family members live in the home.

The county agency must review all verified assets and will determine which assets are:

- Counted toward MA eligibility.
- Excluded and not counted toward MA eligibility.
- Considered protected for a community spouse, if married.
- Protected because the person's LTCP policy has paid some LTC benefits. (This will be explained later)

The county will determine if the person needs to reduce countable assets to the $3,000 asset limit to be eligible for MA payment of LTC services.

Assets of Married Couples

A person in an LTCF or receiving EW services is considered a household of one for MA, even if married. He or she has an asset limit of $3,000 in countable assets. However, evaluating assets of a married person is very complicated and several questions need to be addressed.

- Is the spouse also receiving or requesting MA payment of LTC services? If Yes, then each one is treated as a single individual for purposes of the MA eligibility. Each has an asset limit of $3,000 in countable assets.
- Is the spouse living independently in the community and is not requesting or receiving MA payment of LTC services? If Yes, then that spouse is considered a **community spouse** An asset assessment must be completed for the married couple (the LTC spouse and the community spouse).

In the **asset assessment** process:

- The married couple reports all assets owned solely by each spouse and jointly by both spouses. This should be done as soon as one spouse requires LTC services that are expected to last at least 30 days, whether or not they are requesting MA at that time.
- The county evaluates all verified assets to determine the amount of countable assets that can be kept by the community spouse. A community spouse may keep either the minimum asset allowance for that year or one-half the total countable marital assets (up to a maximum amount). The minimum and maximum amounts are adjusted annually.
- The county also estimates when the LTC spouse may possibly be eligible to receive MA payment for LTC services.

Two important points to remember:

- **Reporting all assets for the assessment ensures that the greatest amount possible will be protected for the community spouse in the future.**
- **A married couple's asset assessment must be completed before assets are protected under the LTCP. This allows the couple to protect only those assets that are considered available to the LTC spouse.**

Pablo and Tasha Example

Pablo and Tasha are married. Pablo moved into a LTCF on December 1 and was expected to stay there for longer than 30 consecutive days. They asked the county agency for an asset assessment and completed the required form, verifying all assets in which Pablo and/or Tasha had an ownership interest on the day he entered the LTCF.

The county worker completed the asset assessment calculation and determined that they owned $120,000 in countable assets on December 1 (Pablo's first day of 30+ days in the LTCF). It was estimated that $60,000 (one-half of their marital assets) would be protected for Tasha if Pablo ever applies for MA payment of LTC services.

Pablo therefore privately paid for the first six months of his stay in the LTCF. On July 8 of the following year, he applies for MA payment of LTC services. They verify that they have $65,000 of countable assets.

Of the $65,000:

- Tasha, the community spouse, may keep $60,000 (the amount calculated on the date of the asset assessment).
- Pablo, the LTC spouse, has $5,000 in assets available to meet his needs. He must spend $2,000 in order to meet his $3,000 MA asset limit. The county worker would suggest ways he can spend that amount without creating an uncompensated transfer.

Interaction between the LTCP Program and MA Eligibility

Asset Protection

An LTCP participant in Minnesota:

- Requests MA payment of LTC services either as an elderly or certified disabled person **and**
- Meets all eligibility requirements for MA-LTC **or** meets all the requirements except for the asset limit **and**
- Has a qualified LTCP policy that paid for some LTC costs since July 1, 2006.

Note that MA benefits are not automatic for people with LTCP insurance. Even with asset protection, people must meet all MA-LTC requirements, including the asset limit of $3000 in countable assets.

To help attain the $3000 asset limit, an LTCP participant may designate a certain amount of assets for protection. Protected asset(s) will be listed on a form provided by the county agency and the value of each protected asset must be verified.

- Designated assets do not count toward the person's MA asset limit.
- The amount of protected assets equals the amount that the Partnership policy paid for LTC services since July 1, 2006.
- The LTCP participant can protect $1 of assets for every $1 paid by the LTCP insurance.
- The full amount that a person can protect is called his **Protected Asset Limit (PAL)**.

After a person protects an asset, he or she can:

- Keep it. The value will have to be reported each year and will count towards the PAL.
- Give it away. A designated asset may be transferred to any other person without penalty. The value of the asset on the day it is given away will usually count towards the PAL.
- Use it to get another asset. Then the new asset becomes protected and its value will count towards the PAL.
- Spend it on goods or services. For instance, John spends $6,000 from a protected bank account to go on a cruise. That $6,000 will still count towards his PAL.

A person cannot change his mind about what assets he has protected. For example, Marie has a bank account and owns a home. Her PAL allows her to protect just one of them, and she decides to protect her bank account. Marie cannot later change her mind and protect the home instead.

Note that two types of assets cannot be protected under the LTCP. Federal Medicaid rules state that when a person dies, the following assets must be available to reimburse DHS for the amount of MA benefits paid during his or her lifetime:

- Resources in a Special Needs Trust or a Pooled Trust and
- Annuity interests in which Minnesota must be named as a preferred remainder beneficiary.

The Liens and Estate Recovery section will explain what happens to protected assets when the LTCP Participant dies.

Decisions about Protecting Assets

When a person requests MA payment of LTC services, he or she may:

- Be eligible without having to protect any assets.
- Have assets worth less than his or her PAL.
- Have assets worth more than his or her PAL.

A person does not have to use the maximum amount of asset protection right away. The person who is eligible for MA by protecting just part of the PAL may have options in the future. He or she may choose to protect:

- The increased value of a protected asset.
- A newly acquired asset, such as an inheritance.
- An asset that is normally excluded for MA, such as a home in which a person or spouse lives.
- An asset that was formerly excluded, but became countable. For example, when an excluded home is sold, proceeds from the sale are counted as an asset.

The person whose assets are worth more than the PAL will have to make some decisions. The county will explain which assets are excluded for MA, what amount is considered the spouse's based on the asset assessment, and what amount is counted towards the MA asset limit. The person whose assets exceed the MA limit may either:

- Re-apply for MA-LTC after the LTCP insurance has paid for more care.
- Re-apply for MA-LTC after reducing assets in the future.
- Reduce countable assts right away to become eligible for MA-LTC. The county agency can suggest ways to reduce assets without creating an uncompensated transfer. For example, the person may purchase a TV or new clothing.

When Protected Assets Increase in Value

Some protected assets will increase in value due to interest or dividends, etc. What happens then depends on the person's PAL and the value of all the protected assets.

- The increase in value will also be protected if total value of all protected assets is still below the PAL.
- If the total value of protected assets is greater than the PAL, the person may have to reduce some assets so countable assets go under the MA asset limit.

When an MA Client's LTCP Continues to Pay Benefits

A person's PAL will increase as long as the LTCP insurance continues to pay benefits. Once a year:

- The person will have to report the status and value of all protected assets.
- With the person's permission, the agency will contact the insurance company to find out the value of benefits paid over the past year.
- The county agency will tell the LTCP person if his or her PAL has increased.
- Any increase in the value of protected assets over the past year will be applied to the PAL.
- If additional asset protection remains, the person may protect more assets.

Liens and Estate Recovery

Assets protected during a person's lifetime will stay protected after he or she dies. The state or county will not file a claim against a person's protected assets to repay MA for that person's health care. However, as explained below, MA claims may be filed against assets that are not protected.

A lien is usually placed against a person's home or other real property when a person gets MA benefits. A lien may be filed against:

- An interest in a life estate.
- Real property owned solely by one person.
- Real property owned jointly with other person or persons.
- The portion of real property that is not protected because of LTCP insurance.

Liens are not filed if:

- The person is in a long-term care facility nursing home and will return to his own home or
- The person's spouse is residing in the home or
- The home or other property was fully protected because of LTCP insurance.

Sometimes property is worth more than the person is allowed to protect. In that situation, a lien may be filed against the value of property that is higher than the PAL amount. For example, David's property is valued at $200,000. His PAL amount is $150,000 and he chooses to protect $150,000 of his property. When David dies, the $150,000 amount that he protected will stay protected. However, a claim or a lien may be filed against the other $50,000 worth of property.

After an LTCP client dies:

- Assets which were protected during his lifetime are also protected from estate recovery. The state or county will not file a claim against his protected assets to repay MA. However, they may file an MA claim against any assets that were not protected.
- When the person does not protect assets during his lifetime, or when he protects less than his PAL, his personal representative may protect assets during the estate recovery process - up to the total amount of his PAL. See the Anna example below.

What about the protected assets of someone who is married? We know what happens to a protected asset when the person dies, but what happens to that asset when his surviving spouse dies? The answer to this question depends on whether the surviving spouse:

- Had an LTCP policy and
- Received MA-LTC benefits.

Review the Jack and Jill example below.

Estate Recovery Examples

Anna Example

Anna's LTCP insurance paid for her LTC for one year before she applied for MA payment of LTC services. At that time her countable assets were below the MA asset limit and she was eligible for MA without protecting any assets. When Anna died, she had received MA-LTC benefits for three years and never designated an asset for protection.

So did Anna or her family lose out on asset protection completely? No. When Anna died, her personal representative was able to protect assets from MA estate recovery, up to her PAL amount.

Jack and Jill Example

Jack and Jill were married. Jack received MA payment for LTC services and protected an asset because of his LTCP. Jack's protected asset remained protected when he died.

Several years after Jack died, Jill entered an LTCF and received MA-LTC benefits. What happens to Jack's protected asset when Jill dies? That depends on whether Jill also protected the asset because of her own LTCP.

- If Jill did not protect the asset because of her own LTCP, a lien or estate recovery claim may be filed against Jack's protected asset to repay Jill's MA costs.
- However, a lien or estate recovery claim will **not** be filed if Jill also protected that asset because of her own LTCP.

Mabel and Wilma Examples

Mabel and Wilma have similar stories. Both women receive LTC services in their own homes. The services are partially covered by a qualified $20,000 LTCP policy. Each woman has used $10,000 of policy benefits. Neither one has resources to pay for services not covered by LTCP insurance.

Both Mabel and Wilma are found eligible for MA payment of LTC services through the Elderly Waiver (EW) program. Their LTCP policies are treated as third party liability and MA pays for services not covered by the LTCP.

When applying for MA, they each own the following assets:

- $2,500 savings account.
- House with an equity value of $50,000.
- Insurance-funded burial.

Each woman's assets are evaluated for MA as follows:

- The savings account is a countable asset, with a value less than her MA-LTC asset limit.
- The insurance-funded burial meets specific guidelines and is excluded for MA.
- The home is excluded because she lives there.

Mabel and Wilma were both found to be eligible for MA payment of LTC services. When MA opened, neither woman chose to protect any assets.

Now their stories become different. Remember, their LTCP policies had a maximum lifetime benefit of $20,000.

Mabel dies after using another $5,000 of LTCP benefits, for total LTC insurance payments of $15,000. Although she could not benefit from the full value of the policy, her personal representative may designate $15,000 of Mabel's assets so they are protected from estate recovery.

Wilma exhausts the remaining $10,000 of her LTCP policy benefits during her first six months of receiving MA payment of LTC services. Although the full $20,000 of her LTCP benefits have been used, Wilma still does not feel a need to designate any assets for protection.

A few months later Wilma's brother dies, leaving her a $10,000 inheritance. Adding her $3,000 savings account to the inheritance gives her countable assets of $13,000. Because this puts her over the $3,000 limit, she designates the $10,000 inheritance as protected under LTCP. Wilma remains eligible for MA payment of LTC services.

One month later she gives the $10,000 protected asset to her granddaughter for college tuition. There is no uncompensated transfer because the $10,000 was an LTCP protected asset. That $10,000 is still counted as a protected asset, even though she gave it away.

When Wilma dies two years later, she owns the insurance-funded burial and her home. Remember, Wilma's $20,000 LTCP policy paid the full amount of benefits for her. So what could happen with her remaining assets?

- Her insurance-funded burial was used in full to cover funeral costs.
- Wilma had protected the $10,000 inheritance during her lifetime.
- So another $10,000 could be protected after she dies.
- Since the home is the sole asset in her estate, her personal representative could protect $10,000 of the home's equity value from estate recovery.
- A claim or a lien could be filed against the remaining equity value of the home.

How to Apply for Minnesota Health Care Programs

A person may apply for any of the Minnesota health care programs by completing a Minnesota Health Care Programs Application, also known as the HCAPP (Form DHS-3417).

- The HCAPP allows people to apply for any or all of Minnesota Health Care Programs on one form.
- People may request an application form by:
  Calling the Department of Human Services (DHS) at (651) 431-2670 or (800) 657-3739.
  Visiting or calling their county office. Agency addresses and phone numbers are listed in the application.
- A complete signed and dated HCAPP can be faxed or mailed to the county agency. Agency addresses are listed in the application.
- People may ask the county agency to help them complete the application and contact third parties for required information and/or verifications.
- Health Care coverage generally begins in the month that the county receives a completed, signed and dated application.
- People may ask that Medical Assistance coverage begin up to three months before the date they apply.

General Differences in Medicaid Eligibility between Minnesota and Neighboring States

Medicaid is a federal/state health care program and eligibility regulations differ from state to state. It may be helpful to briefly review the areas of difference, especially if you sell LTC insurance in states other than Minnesota.

Household Size

- In Minnesota a person in an LTCF is considered a household of one for MA purposes, even if that person's spouse is also a resident of that facility. A person receiving home and community-based waiver services is also considered a household of one, even if the person has a spouse.

  Other states may consider a married person receiving waiver services as a household of two, and both spouses in an LTCF are considered to be a household of two.

Assets

- In Minnesota a person's asset limit for MA-LTC in Minnesota is $3,000. Other states, such as South Dakota and Wisconsin, follow SSI guidelines, allowing countable assets of $2,000.

- In Minnesota a homestead is excluded for a person’s first six months in an LTCF unless a physician’s statement verifies that the person is expected to return home and/or certain other family members reside in the home. The exclusion begins on the person's date of admission into the facility, not on the date the person applies for MA-LTC.

  Other states exclude the homestead indefinitely while a person is in a nursing home.

- A community spouse's asset allowance is the amount of assets that a community spouse can keep when the LTC spouse applies for MA payment of LTC. Minnesota's minimum allowance for 2008 is $29,389.

  North Dakota's minimum is lower than Minnesota's and Wisconsin's minimum is higher. Also, some states have no minimum community spouse asset allowance.

- The MA-LTC home equity limit in Minnesota is $500,000. Other states have home equity limits as high as $750,000.

MA-LTC Screening

- In Minnesota, people must have a Long-Term Care Consultation (LTCC) to determine their needed level of care. For MA payment, they must begin LTC services within 60 days of the LTCC.

  Screening requirements and processes differ from state to state.

Income and Deductions

- Minnesota provides health care programs for medically needy people whose income is higher than their MA income limit, but their medical costs allow them to spend down to the income standard. Some people may not be eligible for MA in the community because of their income, but may be eligible for MA-LTC because they can spend down by deducting nursing home costs.

  Some states do not allow an income spenddown provision.

- A Personal Needs Allowance is the amount of monthly income a person receiving MA-LTC can keep for personal needs. The amount of this allowance differs significantly between states with a range from $45 to $84.

  In Minnesota the Personal Needs Allowance is adjusted annually. In other states it is a fixed amount that is not adjusted on a regular basis.

- Minnesota allows some people in an LTCF to deduct a Home Maintenance Allowance for three full calendar months to help maintain their homes in the community. A doctor must certify that the LTCF stay is temporary and the person is expected to return home.

  Many other states do not allow this deduction.

LTCP Asset Protection

- Minnesota allows a person with LTCP to protect an amount of assets equal to the benefits paid by the LTCP since July 1, 2006.

  Other states have different rules about which benefits paid by LTCP will determine the amount of assets a person can protect under the Partnership.

- Minnesota allows MA-LTC clients to accrue asset protection as additional payments are made by their LTCP insurance.

  Some states do not allow additional asset protection after a person is enrolled in Medicaid.

Summary

This document is intended to help readers understand:

- General eligibility policy relating to Medical Assistance payment of long-term care services in Minnesota.
  and
- The interaction between Medical Assistance eligibility policy and the Long Term Care Partnership in Minnesota.

Medical Assistance eligibility policy is very complex, and incorporates special regulations and exceptions for various situations. This document provided general MA information with a special focus on the person with an LTC Partnership policy who resides in an LTCF or receives EW services.

It is recommended that insurance producers do not try to determine someone's potential eligibility for MA payment of LTC services and do not try to determine the amount of assets that would be counted for MA or for a community spouse. County agencies should be contacted for information regarding MA regulations that apply to other situations.

This Long Term Care Partnership training document is available online at www.mnltcpartnership.org

Questions can be emailed to dhs.ltc.partnership@state.mn.us