



Medicaid

Planning & Eligibility

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How will you pay for long term care costs?

Long term care costs can deplete the assets which you have worked hard to earn and save. You can create a plan using one or more of the following ways, which will help to preserve your life savings while providing you with the care you need.

1. Private Pay: You will need substantial resources in order to private pay for your care. Nursing homes can cost between \$8,000.00 to \$12,000.00 per month in New York. The average is about \$10,000.00 per month.

2. Long Term Care Insurance: You will need substantial resources and income to pay the insurance premiums. However, the benefits received may be considerable.

3. Medicare: Most individuals aged 65 and older are eligible for Medicare, but not much coverage is provided.

4. Medicaid: This is a joint federal & state program, which can provide coverage for most if not all of your long term care costs.

However, there are several eligibility requirements you must meet, including limits on the amount of assets and income you can possess. If married, the assets and income of your spouse will also be considered.

Medicaid Eligibility

In order to qualify for Medicaid, you must:

- Be at least 65 years of age or under age 21, blind or disabled.
- Have no more than \$3,850.00 in assets in your name.
- Retain no more than \$662.00 per month of income if living at home, or \$50.00 per month if living in a nursing home.

Assets

You may possess up to \$3,850.00 in assets in your name. However, there are certain assets which Medicaid will not consider in calculating your total assets. Any excess resources need to be spent down or transferred prior to Medicaid qualification.

Transfer Penalty

If you transfer assets for less than fair market value, you may incur a period of ineligibility based on your transfers.

Income

If you are single and living at home, you are allowed to keep up to \$662.00 of income per month. If you are residing in a nursing home, you are only allowed to keep \$50.00 of income per month. Any excess income must be used to pay for your long term care or paid back to Medicaid.

Look-Back Period

When you apply for Medicaid, the local agency will review all financial statements and transactions during a specified “look-back” period. Generally, the look back period is 36 months. However, if a trust has been executed, the look back period is 60 months.

Medicaid law and eligibility rules are complex. Please consult a qualified professional to discuss the appropriate Medicaid plan for you.