

Spousal Impoverishment Protection

When a husband or wife qualifies for Medicaid and has long-term care needs that require a high level of care, which is provided in a nursing home, swing-bed facility, the State Hospital, or at home (through the Medicaid home and community based services waiver), there are protections to prevent the other spouse from becoming impoverished. Spousal Impoverishment rules allow the spouse at home (the community spouse) to keep additional income and assets so he or she can continue to live independently. **Individuals with long-term care needs can learn more about the income and asset limits on this protection, or apply for Medicaid, at their local county social service office.**

To Qualify:

- A spouse must qualify for Medicaid AND need a level of care comparable to that provided in a nursing home.
- The care must be expected to be needed for at least 30 days.
- The Community Spouse cannot be receiving long-term care services.

Other Program Provisions:

- The Community Spouse can keep all of his or her own income.
- The spouse receiving long-term care is allowed to keep some money for personal needs. Excess income may be given to the Community Spouse if the Community Spouse has less than \$2267 in monthly income.
- The spouse receiving care can have any private health care coverage and still qualify for Medicaid coverage.
- The spouse receiving long-term care can keep up to \$3,000 in countable assets; the Community Spouse is allowed to keep up to half of the couple's countable assets owned as of the

first day his or her spouse began receiving long-term care services.

- There is a maximum amount of assets the Community Spouse can keep to qualify. There is also a minimum amount, which may allow the Community Spouse to keep more than half of the couple's assets. These amounts change yearly.

Asset Assessment:

- When a spouse begins receiving long-term care services, the couple can request an assessment of their assets by the county social service office.
- The assessment identifies which assets are countable and which are not. It also identifies the amount each spouse can keep and the amount, if any, that will need to be spent down before Medicaid eligibility can be granted.
- An asset assessment may also be requested at the facility where the spouse is receiving care.

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Frequently Asked Questions:

Spousal Impoverishment Protection & Medicaid Coverage

Q - How is the Spousal Impoverishment Protection different from regular Medicaid coverage?

A - Under regular Medicaid coverage, a couple is limited to \$6,000 in countable assets. Under the Spousal Impoverishment provisions, the spouse receiving long-term care may have up to \$3,000 in countable assets and the Community Spouse may keep up to half of the couples' countable assets (up to the federal limits). Also, under Spousal Impoverishment provisions, the spouse receiving long-term care may be able to give excess income to the Community Spouse.

Q - How are the assets determined?

A - All assets owned by a couple are considered. Some of these assets may not be countable. The Community Spouse is allowed to keep up to half of the countable assets. The spouse receiving care is allowed to keep \$3,000. The couple can request an asset assessment to identify which assets are countable, and how much each spouse is allowed to keep.

Q - I have been told we have too many assets and need to “spend them down.” What does this mean?

A - “Spending down” assets means that excess assets must be spent to bring the assets down to within program limits. Assets cannot be given away. The share of assets belonging to the spouse receiving long-term care may only be spent for that spouse's bills, needs, or expenses. **IMPORTANT:** If you are unsure what is or is not a legitimate spend-down, please contact your local county social service eligibility worker.

Q - Can I stop paying for long-term care costs when I apply for Medicaid?

A - No. You should continue to pay for care expenses while your Medicaid application is pending. It will not delay the effective date of benefits and may even allow benefits to begin sooner.

Q - Is there a penalty if I give some assets to my children?

A - Yes. Except for certain circumstances, this would be a “disqualifying transfer” and Medicaid will not pay for long-term care services for you or your spouse for several months or even years, depending upon the value of the assets transferred to your children.

Q - What is the earliest day an individual can be covered?

A - Medicaid can cover an eligible individual's qualifying medical expenses incurred up to three months before the month the individual submitted his or her Medicaid application.

Q - My spouse is in a Basic Care Facility. Would we be eligible under this provision?

A - No. This provision applies ONLY for those with significant care needs who require long-term care services. Basic Care facilities are designed to serve people with fewer care needs.

For more information, contact your local county social service office. County contact information is at www.nd.gov/dhs/locations/countysocialserv/index.html.