

LAMSON & CUTNER, P.C.

2 West 45th Street, Suite 1408
New York, New York 10036
(212) 447-8690

84 Calvert Street, Suite 1F
Harrison, New York 10528
(914) 732-3636

lamson-cutner.com



SENIOR INTELLIGENCE™ COMMUNITY MEDICAID

WHAT DOES COMMUNITY MEDICAID COVER IN NEW YORK?

- ❖ Home Care
- ❖ Assisted Living Program (ALP)
- ❖ Adult Day Care
- ❖ Programs for special needs, *e.g.*, Traumatic Brain Injury
- ❖ Hospital and Medical Care
- ❖ Physical Therapy and Occupational Therapy
- ❖ Prescription Drugs

WHAT IS NOT COVERED BY COMMUNITY MEDICAID IN NEW YORK?

- ❖ Community Medicaid generally does not pay ordinary living expenses, or for other services that the Medicaid recipient may need. For example:
 - Financial advisor
 - Daily money manager
 - Geriatric care manager
 - Supplemental home care
 - Legal services
 - Accountants
- ❖ Nursing Home care is not covered by Community Medicaid. See our Senior Intelligence™ Nursing Home Medicaid Quick Reference Guide for more information.

WHAT ARE THE REQUIREMENTS FOR COMMUNITY MEDICAID ELIGIBILITY?

- ❖ Eligibility is based on resources (assets). Please refer to our Medicaid Quick Reference Chart for the most up to date resource and income limits.
- ❖ Income (Home Care):
 - If greater than the current year's limit, contribute balance to cost of care, or deposit balance in a Pooled Income Trust.
- ❖ Income (ALP):
 - Pay "surplus income" to the ALP; or deposit balance in a Pooled Income Trust.
 - ALP budgeting is different from Home Care.

CAN I TRANSFER ASSETS OUT OF MY NAME TO BECOME ELIGIBLE FOR MEDICAID?

- ❖ Community Medicaid applications are scheduled to be subject to a 30-month “look back” beginning April 1, 2024. Implementation of the “look back” has previously been delayed, and it may be delayed again. Transfers within the “look back” (if and when it is implemented) may result in a period of ineligibility for Medicaid benefits (the “penalty period”).

HOW WILL THE NEW “LOOK BACK” AND “PENALTY PERIOD” WORK?

- ❖ Determine the amount or value of assets transferred during the “look back” period.
 - Divide this amount by the regional rate of care. The applicable regional rate is based upon your county of residence.
 - The mathematical result of dividing the assets transferred by the regional rate represents the number of months you will be subject to a “penalty period.”
- ❖ The “penalty period” begins when the applicant is otherwise eligible for services, and has a demonstrated need for long-term care services.
- ❖ During the penalty period, the applicant will have to private pay for their long-term care services.

DO YOU WANT TO LEARN MORE?

Talk to an attorney at Lamson & Cutner, P.C. to learn how you can plan to protect your assets and become Medicaid eligible.

Call us now at (212) 447-8690