

# MEDICARE & MEDICAID

Residents may be eligible for benefits under Missouri's Medicaid Program

## MEDICARE

To receive Skilled Nursing Medicare benefits in a long-term care facility, you must have been hospitalized for at least 3 consecutive in-patient days (not including the day of discharge) within the past 30 days. In addition, you must also require 24-hour skilled nursing care or full-time therapy services.

Medicare will cover the total cost of the first 20 days of your long-term care facility stay. On the 21st day, you will have a Medicare co-pay. If you have a supplemental insurance, these additional costs may be covered. The maximum number of skilled nursing care days covered by Medicare may be up to 100 days per benefit period.

If the long-term care facility determines you no longer require skilled nursing care, then you no longer qualify for Medicare Skilled Nursing coverage. A "Denial Letter" must be issued to you by the facility stating the decision. If you disagree with the decision, you may appeal by calling the independent review entity Livanta at 1-888-755-5580.

For more information on Medicare coverage and your rights, call the CLAIM program at 800-390-3330.



AN EQUAL OPPORTUNITY/AFFIRMATIVE ACTION EMPLOYER

Services provided on a nondiscriminatory basis. Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Ombudsman Program at 800-309-3282. Individuals who are deaf, hard-of-hearing, or have a speech disability can dial 711 or 1-800-735-2966.

## MO HealthNet FOR NURSING FACILITY RESIDENTS

MO HealthNet provides payment if your monthly income is not sufficient to cover the cost of the nursing home care.

### To Qualify for MO HealthNet you must:

- ✓ be in a MO HealthNet certified (vendor) bed; have assets of less than \$5,035; and meet level of care requirements.

### You may:

- ✓ be able to keep your home; and
- ✓ have life insurance policies or prepaid burial plans with total cash surrender values less than \$1,500 or an irrevocable preneed burial contract.

### You may be ineligible:

- ✓ if you or your spouse transfer funds or property for less than fair market value.

### Special Consideration for Married Couples:

Once a spouse is in a nursing facility or medical institution; AND is expected to be in the medical institution or nursing facility for at least 30 days, contact the Family Support Division for a division of assets.

The spouse who remains at home will be able to keep some assets above the \$10,070 limit.

Division of assets helps prevent the spouse remaining at home from being impoverished due to the cost of nursing home care. The spouse remaining at home may also qualify to receive part or all of the nursing home resident's monthly income.

**Contact this facility's administrative offices for information regarding MO HealthNet or the local Family Support Division to apply for MO HealthNet benefits.**