#### TRANSFER OF ASSETS

- 1917(c) FOR TRANSFERS OF ASSETS FOR LESS THAN FAIR MARKET VALUE MADE ON OR AFTER FEBRUARY 8, 2006, the agency provides for the denial of certain Medicaid services.
  - Institutionalized individuals are denied coverage of certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

The agency does not provide medical assistance coverage for institutionalized individuals for the following services:

Nursing facility services;

Nursing facility level of care provided in a medical institution;

Home and community-based services under a 1915(c) or (d) waiver.

- 2. Non-institutionalized individuals:
  - \_X\_ The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

Home and Community Based Services waivers under 1915(c).

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The agency withholds payment to non-institutionalized individuals for the following services:

Home health services (section 1905(a)(7));

Home and community care for functionally disabled elderly adults (section 1905(a)(22));

Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

The following other long-term care services for which payment for medical assistance is otherwise made under the agency plan:

- 3. <u>Penalty Date</u>--The beginning date of each penalty period imposed for an uncompensated transfer of assets is <u>the</u> <u>later of:</u>
  - the first day of a month during or after which assets have been transferred for less than fair market value;
  - The State uses the first day of the month in which the assets were transferred
  - \_\_\_\_ The State uses the first day of the month after the month in which the assets were transferred

or

• the date on which the individual is eligible for medical assistance under the State plan and is receiving institutional level care services described in paragraphs 1 and 2 that, were it not for

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		the wou	imposition of the penalty period, ld be covered by Medicaid;
		AND	
		per	ch does not occur during any other iod of ineligibility for services by son of a transfer of assets penalty.
4.	In deter	mining the	nstitutionalized Individuals penalty for an institutionalized ency uses:
		nursing fa	e monthly cost to a private patient of cility services in the State at the plication;
		nursing fa which the	e monthly cost to a private patient of cility services in the community in individual is institutionalized at the plication.
5.	The agenthe the same individu	cy imposes method as al, includ	on-institutionalized Individuals a penalty period determined by using is used for an institutionalized ling the use of the average monthly cost y services;
	_	imposes a imposed fooutlined b	shorter penalty period than would be or institutionalized individuals, as selow:
6	Donalty	noried for	amounts of transfer loss than sest of
6.	nursing	facility c	amounts of transfer less than cost of care
	I	monthly coa imposes a p	amount of the transfer is less than the st of nursing facility care, the agency penalty for less than a full month, he option selected in item 4.
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#### TRANSFER OF ASSETS

\_X\_ The state adds together all transfers for less than fair market value made during the look-back period in more than one month and calculates a single period of ineligibility, that begins on the earliest date that would otherwise apply if the transfer had been made in a single lump sum.

## 7. <u>Penalty periods - transfer by a spouse that results in a penalty period for the individual--</u>

- (a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.
- (b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

### 8. Treatment of a transfer of income-

When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

- $\underline{\mathbf{X}}$  For transfers of individual income payments, the agency will impose partial month penalty periods using the methodology selected in 6. above.
- \_X For transfers of the right to an income stream, the agency will base the penalty period on the combined actuarial value of all payments transferred.

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The agency does not impose a penalty for transferring

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assets for less than fair market value in any case in which the agency determines that such imposition would work an undue hardship. The agency will use the following criteria in making undue hardship determinations:

Application of a transfer of assets penalty would deprive the individual:

- Of medical care such that the individual's health (a) or life would be endangered; or
- Of food, clothing, shelter, or other necessities of (b) life.

#### Procedures for Undue Hardship Waivers 10.

The agency has established a process under which hardship waivers may be requested that provides for:

- (a) Notice to a recipient subject to a penalty that an undue hardship exception exists;
- (b) A timely process for determining whether an undue hardship waiver will be granted; and
- (c) A process, which is described in the notice, under which an adverse determination can be appealed.

These procedures shall permit the facility in which the institutionalized individual is residing to file an undue hardship waiver application on behalf of the individual with the consent of the individual or the individual's personal representative.

#### Bed Hold Waivers For Hardship Applicants 11.

The agency provides that while an application for an undue hardship waiver is pending in the case of an individual who is a resident of a nursing facility:

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the	bed	for	the	ind:	ividī	ıal	will	be ma	ade
for	a pe	riod	d not	t to	exce	eed		days	(may
not	be g	reat	er t	han	30)				

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# SUPPLEMENT 9(b) to ATTACHMENT 2.6-A Page 6

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY AC	STATE	PLAN	UNDER	TITLE	XIX	OF	THE	SOCIAL	SECURITY	AC	Т
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# SUPPLEMENT 16 TO ATTACHMENT 2.6-A Page 1

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State:					
DISQUALIFICATION FOR LONG-TERM CARE ASSISTANCE FOR INDIVIDUALS WITH SUBSTANTIAL HOME EQUITY					
1917(f)	The State agency denies reimbursement for nursing facility services and other long-term care services covered under the State plan for an individual who does not have a spouse, child under 21 or adult disabled child residing in the individual's home, when the individual's equity interest in the home exceeds the following amount:				
	<u>X</u> \$500,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest \$1,000).				
	An amount that exceeds \$500,000 but does not exceed \$750,000 (increased by the annual percentage increase in the urban component of the consumer price index beginning with 2011, rounded to the nearest \$1,000).				
	The amount chosen by the State is				
	This higher standard applies statewide.				
	This higher standard does not apply statewide. It only applies in the following areas of the State:				
	This higher standard applies to all eligibility groups.				
	This higher standard only applies to the following eligibility groups:				
	The State has a process under which this limitation will be waived in cases of undue hardship.				
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