

**Can
Medicaid
help me
with my
nursing
home bills?**



**DEPARTMENT OF
PUBLIC HEALTH &
HUMAN SERVICES**

For residents in a nursing home or those anticipating placement, paying for care month after month is a worry because it can drain or deplete lifelong savings. The Medicaid Program helps pay for nursing home care for those who could not otherwise afford care. Medicaid currently assists about two thirds of all nursing home residents in Montana.

The following are some frequently asked questions about nursing home expenses and Medicaid eligibility. Medicaid regulations are complex and change frequently. Answers are designed to give a basic understanding of the requirements. For more information, contact your County Public Assistance Field Office.

To be eligible for Medicaid in a nursing home, you must:

- meet all non-financial criteria (be 65 or older, blind or disabled; a U.S. citizen; and have a Social Security number)
- be admitted under a doctor's order
- meet the medical criteria for needing nursing home care
- meet the financial need requirements
- get a pre-admission screening (see page 6)

Do I have to be impoverished to receive Medicaid?

No, but Medicaid is designed to assist people who have medical needs and limited financial means to pay them. Medicaid has specific limits on the maximum amount of income and resources you must meet. Residents over the resource limit are ineligible for Medicaid benefits until resources are within the allowable limits.

Income is any monthly benefits or monies you receive, including but not limited to:

- Social Security, or other retirement pensions
- Veteran's Administration benefits
- trust income
- monthly annuity payments

Resources consist of all real or personal property that you own, including but not limited to:

- all bank accounts
- certificates of deposit
- stocks and bonds
- vehicles
- land
- buildings
- collectibles (stamps, art, etc.)

What resources can I keep?

The maximum amount of resources you can keep depends on your marital status and when you entered the nursing home.

Resource limit: 2025

Individual \$2,000

The couple's combined resources on the date of admission are assessed. The spouse at home can keep up to a minimum of \$31,584 and half of the resources up to a maximum of \$157,920. The couple can decide how to divide their resources.

Some resources are **exempt** and **do not** count toward the resource limit:

- a house (under certain circumstances)
- most personal effects and ordinary household goods
- one car (under certain circumstances)
- life insurance if total face value of all is less than \$5,000
- burial plots
- either a burial fund up to \$1,500 or an irrevocable burial contract

Will I have to sell my house?

You can keep your house if:

- your equity in the home is \$730,000 or less, AND
- you intend to return to the home, OR
- your spouse or dependent minor child or disabled adult child lives in the home.

Will I get in trouble if I give away some of my resources?

You cannot give resources away for the purpose of making yourself Medicaid eligible. Medicaid looks at all resource transfers occurring up to **60 months** prior to the date you apply for Medicaid. Transferring or selling any resources for less than fair market value during this period may result in ineligibility.

Can I legally transfer any resources?

You can transfer your home at any time to:

- your spouse
- a child who is under 21, blind, or has been certified totally disabled
- under certain circumstances, to a sibling with an equity interest in the home or a caretaker son or daughter

For other transfers, contact your local Office of Public Assistance.

How much monthly income can a spouse get to live on in the community?

The spouse at home may keep their own monthly income. In addition, the spouse at home may qualify to receive a portion of the institutionalized spouse's income to help meet their basic needs. The income allowance from the institutionalized spouse is dependent on the home spouse's income and maintenance costs (e.g., property taxes, mortgage payments, or utility bills). The maximum allowance a spouse who lives in the community can receive is \$3,948.

As a nursing home resident, do I get to keep any money?

Most residents are allowed to keep \$50 a month from their checks for personal needs. If you only receive SSI, you can keep \$30 for your personal needs. You still have the right to decide where your retirement checks go: to you directly, to the nursing home, or toward any other arrangement you'd like, but you will be responsible for your portion of the nursing home bill.

What if there are other expenses?

Medicaid pays for practically all medical expenses (including daily care costs). Nursing homes must provide a list of the Medicaid -covered services.

Are other family members responsible for paying for my care?

- A spouse is responsible for the bills of a partner prior to Medicaid eligibility.
- Children are not legally responsible for the cost of a parent's care.

Where should I apply?

You can apply at any Montana Public Assistance Office or online at **apply.mt.gov**. Assistance can also be received by calling the Montana Public Assistance Helpline at 1-888-706-1535.

This information is current as of 02/2025. Medicaid policies can and do change, and it is the responsibility of the facility and the applicant to verify the most current policies when working toward establishing Medicaid eligibility.

When should I apply?

This depends on your financial situation. A married resident or spouse should request an assessment of their resources upon admission to a nursing home. This is advisable, since the resource limit for the spouse at home is based on their resources available at the time of admission. Getting the assessment as soon as possible allows you the maximum time for planning and decision making.

Do I have to do anything other than filling out an application?

Yes. All Medicaid applicants must:

- provide all information and documents required by the eligibility worker, and
- contact the Mountain Pacific immediately at 800-219-7035 or 406-443-0320 in the Helena area. The screening team will set the effective date for Medicaid payment (assuming all other eligibility criteria are met). Medicaid payment will not be available for care provided before the screening date.

How soon will I know if I am eligible?

Medicaid may inform you of your eligibility within 45 days from the date of application.

How do new Lien and Estate Recovery Law requirements apply to me?

This law does not affect initial eligibility. To find out more about how the law applies, see the “Montana Lien & Estate Recovery Program” brochure (SLTC-011), available at most places where this brochure is available.

What if I still have concerns or questions?

The Ombudsman Program helps residents and families with problems related to daily care, resident rights, Medicaid or other issues related to nursing home care.

STATE INFORMATION & ASSISTANCE

1-800-332-2272

www.dphhs.mt.gov/SLTC

For information about this program and other senior related issues contact the Information & Assistance program.

Or write: State Information & Assistance Program
DPHHS/Senior & Long Term Care Division
PO Box 4210
Helena, MT 59604-4210

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