

Important Contact Information:

Medicaid eligibility can become complicated when a Trust is used to qualify for Medicaid. As a trustee, you will need to be in contact with many different people. Please write down the names, phone numbers, and email addresses of the following people:

Assigned DPA office:

Office Phone Number:

Office E-mail Address:

Attorney who wrote the trust:

Phone number and email address:

Bank for the Trust Account:

Trust Bank Account Number:

Bank Phone Number:

Care Coordinator (for Home and Community Based Waiver Services)

Care Coordinator Phone Number:

Care Coordinator E-mail Address:

Keep this pamphlet for future reference

Home and Community Based Waiver Medicaid, Nursing Home Medicaid, and TEFRA Medicaid Contact:

Long Term Care Office
(907) 269-8950 or
1-800-478-4372

Questions regarding Medicaid for the Disabled, Blind, or Elderly can be directed to any DPA office

General Trust Questions may be directed to the Division's Policy & Program Development Team at dpapolicy@alaska.gov

**State of Alaska
Dept. of Health & Social Services
Division of Public Assistance
P.O. Box 110640
Juneau, Alaska 99811-0640**



Trustee Information



Michael J. Dunleavy, Governor,
State of Alaska
Adam Crum, Commissioner
Dept. of Health & Social Services
www.hss.state.ak.us

Trusts and Medicaid: When and How

There are three types of Trusts that may be used to assist people to qualify for Medicaid:

- Qualifying Income Trust (QIT), often referred to as a “Miller Trust”;
- Special Needs Trust (SNT); and
- Pooled Trust.

Qualifying Income Trusts:

A Qualifying Income Trust is used when an individual is over income for Medicaid. While Qualifying Income Trusts can be used to access any Medicaid category, they are mostly used to access Medicaid for the blind, disabled, or elderly who are facing high cost, long term health care needs.

Special Needs and Pooled Trusts:

Special Needs and Pooled Trusts are restricted to blind or disabled individuals, who have resources over the Medicaid \$2,000 resource limit. Special Needs and Pooled Trusts must contain the assets of only the Medicaid recipient, but may also have the recipients income deposited into the trust.

Special Needs Trusts are restricted to a disabled individual under age 65.

Pooled Trusts are for a disabled individual of any age and must be established and managed by a non-profit agency.

All trusts must be irrevocable

Now That I Am a Trustee What Do I Need to Do?

By becoming a trustee for a Medicaid Trust you are taking on the financial responsibility for someone who, in most instances, has high medical needs and is often vulnerable. As a trustee, you can ensure the individual continues to be eligible for Medicaid benefits by following the steps below:

1. Get a full and complete copy of the trust document and read it very carefully. Write down any questions you may have and then contact the attorney who wrote the trust for any needed clarifications.
2. Find out the individual's assigned Division of Public Assistance (DPA) office and get the office contact information. Keep the office contact information on hand. DPA is responsible for determining continuing Medicaid eligibility, so remember to report changes to DPA within 10 days.
3. Keep track of all financial obligations of the Medicaid recipient, this includes any cost-of-care obligations for Nursing Home Medicaid and Home and Community Based Waiver Services. Failure to follow through with these financial obligations can jeopardize continued Medicaid eligibility
4. Keep copies of all bank statements and keep an accounting of the use of all trust funds.

Important Trustee Q and A's

**Can money placed into a trust be spent?
How can it be spent?**

- For a Special Needs and Pooled Trust, all money must be used for the sole benefit of the blind or disabled individual.
- For a Qualifying Income Trust, the Medicaid recipient is allowed to keep a Personal Needs Allowance. Most Medicaid recipients with a Qualifying Income Trust also have a cost-of-care obligation. The trustee is responsible for paying the cost-of-care obligation from the trust. The Medicaid caseworker will notify the Medicaid recipient of his or her cost-of-care obligation and, the allowed Personal Needs Allowance.
- Payments from the trust that are used for food or shelter could adversely affect the individual's eligibility or the amount of their cost-of-care obligation.

Will use of Trust funds be reviewed?

- Yes, each year DPA will request to review current bank statements. Additional documentation may be requested if there are any discrepancies.

What if I cannot fulfill my trustee obligations?

If you decide you can no longer act as a trustee for any reason, it is important to:

- Report the change to DPA and give them a copy of the Successor Trustee Appointment document.
- Contact the bank and ensure the new trustee can take over all financial obligations.