

Western Mass Estate Planning

Kate Downes, Esq.
Of Counsel

Deirdre Gleason, Esq.

MASSHEALTH (MEDICAID) APPLICATION CHECKLIST

The following is a list of documents and information that is needed to complete and submit a long-term care application to the Division of Medical Assistance. If the applicant has a spouse, then the spouse's information must be included, as well.

❑ ADMITTANCE INFORMATION

- ❑ Name and address of nursing home and date of placement

❑ PERSONAL INFORMATION

- ❑ Copy of birth certificate(s) *if available – no need to obtain new one, if lost*
- ❑ Copy of marriage certificate (if spouse)
- ❑ Copy of Social Security card *if available – no need to order new one, if lost*

❑ FEDERAL INCOME TAX RETURNS - copies for the last two (2) years, if filed (Massachusetts returns not necessary)

❑ INCOME VERIFICATIONS

- ❑ Social Security – copy of U.S. Treasury check or Statement of Benefits for current year (usually received in December of preceding year – not 1099)
- ❑ Pensions/other – copy of check stub or other statement reflecting current gross pay and all deductions (form 1099s from prior year or direct deposit notation on bank statement are not sufficient); verification must be current

❑ HEALTH INSURANCE INFORMATION

- ❑ Copies of back and front sides of health insurance card(s), including Medicare and any supplemental insurance (e.g., Blue Cross Blue Shield, AARP)
- ❑ Copy of most recent health insurance premium statement and proof of payment (e.g., canceled check)
- ❑ If health insurance premium paid by third party, written verification of same (e.g., pension stub reflecting deduction or letter from third party verifying amount of premium)

❑ ASSET VERIFICATIONS

(verifications must include statements for **prior 60 months**)

- ❑ **Bank (checking, savings, CDs) and investment accounts/IRAs/401(k)s - copies of all statements or passbook records, including any accounts closed during covered time period**
 - statements must include all pages for all months
 - include copies of checks for sums of \$1,000 or greater (no others needed) with explanations/invoices, if appropriate
 - passbooks must include face page, reflecting names on account and account number
 - Please put statements in *chronological order* and *do not write on them*

MASSHEALTH (MEDICAID) APPLICATION CHECKLIST – Page 2

- ☐ Cash – in home or in safe deposit box
- ☐ Life insurance – copies of face pages of policies, reflecting owner and original amount of insurance purchased, together with written verification of cash surrender value (even if no cash value)
- ☐ Trusts – copies of any revocable or irrevocable trust of which you are the donor/settler/grantor, trustee or beneficiary, as well as detailed information on any assets in the name of the trust, even if the trust was established and/or funded more than 60 months ago
- ☐ Funeral - copies of any prepaid funeral contracts reflecting amount paid and statement that contract is irrevocable; Statement of Goods and Services, which itemizes services purchased (note: amount paid must match itemized invoice)
- ☐ Burial savings accounts – copies of account statements or passbook face page reflecting owners and current balance (update if necessary)
- ☐ Stocks/bonds/other - copies of stock certificates, savings bonds, 60 months of complete brokerage and/or mutual fund statements
- ☐ Automobiles - copy of registration(s) to any motor vehicles and value of each (excise tax bill or www.kbb.com printout)
- ☐ Annuities – copies of annuity contract(s) and statements
- ☐ Real estate - copies of deeds to real estate owned in the last 60 months; if transferred out of applicant's name, even if retained life tenancy, include written documentation of tax-assessed value of property as of date of transfer
- ☐ **TRANSFERS** – explanations/supporting documentation of any checks or withdrawals of \$1,000 or more during the period for prior 60 months
- ☐ **SPOUSE'S LIVING EXPENSES (if appropriate)** – verification of current living expenses of spouse, including the following:
 - ☐ Rent/mortgage – recent proof of payment or statement
 - ☐ Real estate taxes – recent tax bill
 - ☐ Homeowner's/tenant's insurance – recent premium statement/bill
 - ☐ Condo fee – recent proof of payment or statement reflecting fee
 - ☐ Utility expenses (heat and electricity) – recent bill for oil/gas and electricity
- ☐ Other: _____