

Everybody says, "I don't want to go into a nursing home before I die." But the reality is if you reach the age of 70, you have an 80% chance of spending on average six months in a nursing home before you die. My grandmother who was 102 before she passed away this last August, we were able to keep her out for a long, long time. But when she turned 100, she was finding herself with long-term care Medicaid in a facility here in Gainesville, and she was there for two years before she died. So even my family has had to go through this process, and it's hard because you think that you're going to have sufficient assets to live on, but many of us don't plan to live to be 102. So Medicaid long-term care is really something that everybody should plan for because in all likelihood, you're going to require it.

I think the other misconception about long-term care is that I can't qualify because I have too much money. And so a lot of people will think like, "I've got a homestead, I've got an IRA. I've got life insurance." You can have all of those things and qualify for Medicaid. In Florida, we can qualify you with \$3,500, \$5,000, \$6,000 in income. That kind of income is not going to provide enough income for you to pay for your own nursing home care. On average in Florida, the cost of nursing home care is \$12,000 a month. It's unrealistic to think that we can afford to pay for our own skilled nursing care before we die. So Medicaid is there as a safety net for people, and the qualification criteria is not meant to impoverish.

For example, if there's a couple, we have one partner who has Parkinson's, it's usually the male, and then the wife could live another 20 years in the community. We do not require our community spouse who's going to live for 20 more years to become destitute in order to cover the costs and expenses of a disease like Parkinson's. Our laws provide that that community spouse can retain the assets and allow that institutionalized spouse or the sick spouse to go into the facility when they need that care, and the community spouse can continue to live a full life with the assets and income that they've accrued in their life.

So there are a lot of options when it comes to Medicaid planning, and we have laws in Florida that take into consideration some of these issues related to families and being able to live a full life. Now, a lot of people also think, "Well, I'll just stay at home." And there are some things that you just cannot get services provided in your home to care for. For example, moving you from the bed to go to the bathroom, those are the types of things that nursing home care is actually necessary because we are living longer. We live longer with illness and we want to be comfortable. We don't want to put strain on our loved ones to have to lift us out of beds. It can be very difficult at the end of our lives, and skilled nursing facilities provide a level of comfort and care that sometimes we need as we're leaving this world, unfortunately.

What will happen in our situations, we get the call, we assess the assets. So we take a full inventory of your assets and income. And then we look to see what assets or income do you have that would be exempt. So what does Florida Medicaid consider exempt assets? For example, your homestead is an exempt asset. So let's say you have \$100,000 in the bank, you also have a home, but you owe a mortgage on that home of \$100,000. Well, you can take that \$100,000 that's in the bank and put it to pay off that mortgage, and now you basically can qualify for Medicaid.

These are just strategies that allow you to qualify for Medicaid while considering the option that potentially you could need Medicaid for a little while and eventually want to go back to your home. So the state of Florida recognizes the importance of maintaining homestead and being able to return there if in fact you ever get well again. So they don't require you to sell your homestead or encumber it. You can actually get into a facility with Medicaid and be able to keep your homestead and some other exempt assets as well, like for example, retirement assets. So if you have retirement assets and you're taking required minimum distributions, Medicaid does not disqualify you for having a large IRA. So long as you're taking those required minimum distributions on a monthly basis, you can still qualify for Medicaid.

And then the other strategy that we often use is something called personal services contracts, which allows you to pay a loved one to help you when you're in the facility. So if I have a daughter who's managing my homestead, who's talking to doctors, helping me to be able to stay in the skilled nursing facility, we can actually enter into an agreement for me to pay her for her services in a lump sum. And that's also a strategy that's allowed by Medicaid because what Medicaid has learned is that when we have family members providing services to our loved ones in skilled nursing care, they do better and they cost less. They're not as sick. They don't get bedsores. They're being maintained properly and observed. And Medicaid saves money on medical expenses when we have personal services contracts in place.

We've only seen people who've been unsuccessful in trying to apply without attorneys. Oftentimes, people will come to us and they say, "Oh no, I've been disqualified from receiving Medicaid benefits for the next seven years." And that's because when they went to apply for Medicaid, Medicaid said, "Oh no, you have too many assets or your assets aren't titled the way that they're supposed to be titled in order for you to qualify, and now we're going to assess a disqualification period against you for the assets that are not qualified." And so once Medicaid issues that disqualification period, it's very difficult to undo.

So a lot of times I will have that discussion with that person saying like, "I'm so sorry. I wish I could help you, but this disqualification period is really difficult. We may be able to reduce it in some regard or appeal it, but oftentimes we can't." I would encourage anybody out there, if not our office, go meet with any Medicaid planning attorney and just hear them out for an hour. Because a lot of times during that one hour that we have with you, we can help you get qualified. So sometimes that's all it takes is that initial consult. If not us, please go to an attorney to get that kind of advice because unfortunately once you file that application, you can't undo it.