

Medicaid (Title 19) Eligibility Document List

The information we need to determine Medicaid (Title 19) eligibility is below. Further, we will need banking statements for the month the applicant entered the facility and the last three calendar months.

If this is a waiver case, we will need statements form the month of the medical needs' assessment and the last 2 calendar months. Lastly, for items such as life insurance, we will need a letter from the life insurance company with the cash value, face value, and when the policy was established.

Please bring the following documents:

	assets: month of entering facility and the last three most recent calendar months on the of medical assessment and the last 2 most recent calendar months.
• •	Insurance policies, if any, including life insurance policies, Annuity contracts, long term care policies (we need cash values amounts, surrender amounts, and the ompany. If it is irrevocable, we need documentation from the company that it is h benefits on these policies)
	Cash, bank accounts (account numbers and type of accounts) and CD's
	IRA, Keogh, and 401K accounts
	Stocks, bonds, and mutual funds
	Value of business assets
	Real Property (other than home)
	All other property including your home the value of your home, and the amount owed if any.

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Documentation of all Income: month of entering facility and the last three most recent calendar months or for waiver cases month of medical assessment and the last 2 most recent calendar months. If need be, we can use the current yearly statement of benefits if it states that they will not change for the year. **Please use actual statements from the company that provides the benefit amounts not 1099's.**

Social Security
US Civil Service
US Railroad Retirement
Military Retirement
SSI/Public Assistance
IPERS
Any other income

Spouse	Applicant	Document	
		Will	
		POA	
		Trust	

Current Will, Trust, and/or Powers of Attorney documents for both Applicant and Spouse (if applicable)

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Vehicle information: (if not provided to the attorney in the meeting)

Owner	Year	Make	Model	Fair Market Value	Amount owed if any
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Items we need copies of all the following information for both applicant and spouse (if applicable)

Applicant	Spouse	Needed Document
		Social Security cards
		Medicare cards
		Any additional health insurance

Do not be concerned if you are unable to provide all the information requested above. The list is designed to cover all clients, and therefore it is possible that not all the items listed will be applicable. Please bring as much of the information and as many documents as you can gather to our meeting.

Please note that all statements and letters must come from the companies themselves. Online screenshots will not work. Also please bring in all pages even if they are blank.

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