

## WHAT IS SPEND DOWN?

Spend down is the way we determine MO HealthNet eligibility for people who have income over the Medicaid limit. The MO HealthNet for Aged, Blind, and Disabled Program has an income limit of 85% of the Federal Poverty Limit (FPL). If your net income is more than 85% of the FPL, you are a spend down.

## WHY IS SPEND DOWN USED?

The spend down program helps some people who have too much income to qualify for other Family Support Division (FSD) MO HealthNet programs.

## HOW DOES IT WORK?

A spend down is similar to an insurance deductible. For MO HealthNet spend down program coverage, you are required to bring your income below the income threshold. You must spend down to meet the income limits. You may Pay-in the amount of your spend down or incur medical expense equal to your spend down. For example, if you are eligible for MO HealthNet, but your income is \$150 more than the limit, the excess income is equal to the spend down amount; you must submit \$150 worth of acceptable medical bills you are responsible to pay, or pay-in your spend down amount to receive MO HealthNet coverage for a month.

## WHO IS ELIGIBLE?

To be eligible, you must be a U.S. citizen or legal immigrant currently living in the state of Missouri. You must be age 65 or older, blind or disabled, as defined by Social Security Administration. Disabled or blind individuals qualify for the spend down program regardless of age. Your resources can not exceed \$999.99 per person or \$2,000 for a couple.

Your home, vehicle, and personal possessions are exempt.

## WHAT MEDICAL EXPENSES ARE COUNTED?

- prescribed drugs
- prescribed dental care
- physician's, hospital, emergency, ambulance, independent laboratory and x-ray, and other medical services covered by the MO HealthNet program
- durable medical equipment
- certain health care and homemaker services provided in the home
- personal care services not provided through other federally funded programs
- certain medically related day health care or adult day treatment
- Private duty in-home nursing services
- Prosthetic devices hearing aids, and eyeglasses
- Services of an optometrist, optician, chiropractor, chiropractist, podiatrist, and,
- Mental health services

## WHAT IS THE EFFECT IF YOU PARTICIPATE IN THE QUALIFIED MEDICARE BENEFICIARY (QMB) PROGRAM?

Medical expenses covered by QMB cannot count toward spend down.

## SPEND DOWN OPTIONS

There are various ways you can meet your spend down:

- Pay-in the spend down each month to ensure coverage every month.
- Submit copies of incurred bills to the Family Support Division monthly. The coverage will begin the day the spend down is met.

- Under certain circumstances, we will allow bills incurred not more than three months ago to meet your spend down.
- If you have medical expenses that are more than your spend down, the extra may be used for spend down for any month in the next three months
- You can use a combination of incurred medical bills and pay in the remainder of your spend down if you do not have enough medical bills.

## WHAT OPTION IS BEST FOR YOU?

Bills can only be used once to meet your spend down.

When you submit more bills than you need to meet your spend down in a month, you must choose what month you want coverage.

If you do not choose, the bills will be applied to the current month or the first month the bills can be applied.

Your coverage for the month will not be active until you meet your spend down amount.

Discuss your options with your eligibility specialist and your provider. Your needs may change and you may choose a different option.

## IS THERE A DEADLINE ON PROVIDING MEDICAL EXPENSES?

Yes. You have one year from the date you are notified of your spend down amount to prove you met spend down for that month. Give us paid and unpaid medical bills as you receive them, or when the expenses total the spend down amount.

## WHEN DOES MO HEALTHNET COVERAGE BEGIN AND END?

The begin date of coverage depends on the spend down option you choose. Coverage begins:

- the first of the month if you pay-in your spend down liability or
- the date your incurred medical expenses equal your spend down amount if you submit bills, or,
- the first of the month following the month your medical expenses exceeded your spend down liability for the month and meet your liability for future months (not to exceed 3 months).

Your coverage continues from the day you meet spend down through the last day of the month.

## WHAT PROOF OF MO HEALTHNET ELIGIBILITY WILL BE PROVIDED IF YOU MEET SPEND DOWN?

You will receive a MO HealthNet card after your initial application is approved. You will receive a letter that includes your MO HealthNet identification number and spend down amount. If you submit partial payment for your spend down, or submit incurred medical expenses to meet your spend down, you will receive a notice with your coverage dates.

## WHAT HAPPENS AFTER THE MONTH ENDS?

The spend down period is one month. Unless you have chosen to pay in your spend down amount or provided medical expenses exceeding your current month spend down amount which meets the following month's spend down, you must provide paid/unpaid medical bills that you owe after other

insurances pay for the next month if you want coverage for the next month.

## IS THERE A METHOD TO HELP WITH PAST UNPAID MEDICAL BILLS?

FSD can determine if you are eligible for MO HealthNet for the Aged, Blind, and Disabled Assistance during the prior quarter. "Prior quarter" is the three months that precede the month of application.

If you did not have coverage in the past three months, ask the eligibility specialist to determine if you are eligible for the prior three months. To be eligible, you must meet spend down each month, with paid/unpaid medical bills that you owe and meet all other eligibility guidelines. If eligible, MO HealthNet begins on the day you meet spend down each month and ends on the last day of each month.

## WHAT HEARING RIGHTS DO YOU HAVE?

If you think you have been denied eligibility unfairly for any reason, call, write, or come in to the Family Support Division office and request a hearing within 90 days after the decision. You will get a letter telling you the time, date, and place of the hearing. During the hearing, you can explain your situation and present evidence or be represented by an attorney, relative, or friend.

Anyone who feels discriminated against in the handling of a public welfare matter because of age, race, color, handicap, sex, religious creed, national origin, or political belief, may file a complaint under the Civil Rights Act of 1964 with the Department of Social Services, Family Support Division, P. O. Box 2320, Jefferson City, Missouri 65102 or the U. S. Department of Health and Human Services, Washington, D. C. 20201 or both the state and federal agencies

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Services provided on a nondiscriminatory basis  
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## WHAT IS SPEND DOWN?

IMPORTANT INFORMATION ABOUT YOUR

## MO HEALTHNET SPEND DOWN PROGRAM

## BENEFITS AND RESPONSIBILITIES