

Medical Eligibility

Medicaid and VA Benefits



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Medical Eligibility

Medical need” for Long Term Care (LTC), must be established before anyone can receive government assistance for that care. Whether you are wanting to qualify for Medicaid LTC or VA “Aid and Attendance” assistance, “medical need” must be present before either program will provide financial help.

Medical need is most often established by reviewing a patient’s ability to perform the Activities of Daily Living (ADLs). This is called a functional assessment, which gathers objective data that may indicate a patient’s current and/or future need for care. The Activities of Daily Living are the essential things that a person must be able to perform, to live a safe health existence. Individually or a combination, the Katz Index of Independence in Activities of Daily Living and/ or the Lawton-Brody Instrumental Activities of Daily Living Scale are most often used to assess a patient’s ability to live and operate independently.



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Activities of Daily Living

Bathing	Medication Management
Dressing	Ability to Handle Finances
Toileting	Feeding/ Food Prep
Transferring	

In general, if a patient is unable to *consistently* and *safely* perform two or more of the ADLs, they are deemed to have “medical need” for VA assistance. “Medical Need” for Medicaid LTC is met when someone need a level of care available at a Nursing Home or Skilled Nursing Facility. Once “medical need” is established, someone may qualify for financial assistance from Medicaid or the VA (subject to separate financial need criteria).

Additional Information

The VA has two other “conditions” that can qualify a patient for Long Term Care Assistance. Those conditions are “legally blind” and being “Housebound”. Legally blind is defined as having vision rated at 20/200 or worse in both eyes. Housebound status has a more vague definition. The definition is, “when you are substantially confined to your immediate premises because of permanent disability.”



How Do I Proof Medical Eligibility?

The lack of ability to perform the ADLs will have to be attested to by a licensed physician. There are specific forms that must be completed by the physician, in order for the patient to qualify. The VA and Medicaid each require a different form. It is important for the physician to provide as much detail as possible, regarding the patients limitations, when completing these forms.



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The key to getting someone approved for VA or Medicaid benefits, based on medical necessity, is getting the right forms completed, by the right person, and having them filled out in exactly the right way. Subtle things about completing the forms can make a big difference in whether an application is approved or not. Example: getting a brief description of why someone cannot perform an ADL, next to the checkbox that indicates they can't, will make a difference on how fast, or whether an application is approved. When done properly, and all of the required supporting material is provided with the initial application, VA approval often comes in 2-4 months.

Once initial medical need is established, and benefits are being provided, there will be an annual reassessment of the patient's ability to perform the ADLs. If the patient's condition improves to the point where they no longer need help with at least 2 ADL's, they may no longer qualify for government assistance. If however, their condition degrades and they need a higher level of care, they may qualify for additional help.



We Can Help!

We see countless cases of people wanting to “do it themselves” when it come to the application process. They get the forms they believe are correct, get them completed by and signed by people they believe are “authorized to sign” and supposedly know how to complete them. Then they are declined benefits more often than not. Once they are totally frustrated with the process, they come to us and “fix it”. We often can help them fix it, but it usually takes far longer to “fix it” than it would have to do it the right way from the beginning.

Bottom line, we have been helping people get VA and Medicaid benefits for over 20 years. We have helped countless people get these benefits, often after they have been told by others, or the agency they are seeking benefits from, that they do not qualify. We are here to help, and do not charge for our guidance. Give us a call for a no charge no obligation evaluation of your situation.



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