



MO HealthNet (Missouri Medicaid) Nursing Home Coverage

Nursing Home Coverage through MO HealthNet helps residents in nursing homes or long-term care facilities pay for room and board, as well as necessary medical and non-medical goods and services. Participants will use all of their income towards costs, except for a \$50 allowance, health insurance premiums, and any income set aside for a spouse or other dependents.

Who is eligible for help?

To qualify for this program, you must meet certain income requirements and be:

- Age 65 (or older), blind, or permanently disabled
- A U.S. citizen (or qualified non-citizen) with a Social Security Number (or proof you have applied for one)
- A resident of Missouri, with no plans to move
- Approved by the Department of Health and Senior Services (DHSS) to get care from a nursing facility

There are set limits for the resources and income you can have to qualify for help through this program. To review these limits, visit tinyurl.com/ResourceLimits and look for "Vendor Care."

How do I apply?

I already have MO HealthNet

If you already have MO HealthNet and you enter a nursing home/facility, you (or an authorized representative) will need to report it as a change. You can report a change:

- **ONLINE:** Visit myDSS.mo.gov and select, "Report a Change." Look for the tab: *Request Changes to your MO HealthNet Coverage*
- **IN-PERSON:** Visit your **local Resource Center**
- **PHONE:** **855-FSD-INFO** (855-373-4636)

*Be sure to tell the nursing facility that you are a MO HealthNet participant so they can report your admission.

I need to apply for MO HealthNet

If you do not have MO HealthNet, you will need to apply for it.

- **ONLINE:** Visit myDSS.mo.gov/healthcare
- **IN-PERSON:** Visit your **local Resource Center**
- **MAIL:** Call **855-FSD-INFO** (855-373-4636) and request a paper application be mailed to you.



When completing your application, be sure to check the box that asks if someone in the household lives in a medical facility or nursing home.

What happens if I'm approved for Nursing Home Coverage?

You will know if your application was approved within 45-90 days. If your application is approved, it is important to keep in mind all of your monthly income will go to the nursing home, except for:

- A set amount for personal needs
- A set amount to help the needs of a spouse still at home (if applicable)
- Money you pay towards medical insurance policies, like Medicare



Discrimination & Civil Rights

HHS provides federal financial assistance for many programs to enhance health and well-being, including TANF, Head Start, the Low Income Home Energy Assistance Program (LIHEAP), and others. If you believe that you have been discriminated against because of your race, color, national origin, disability, age, sex (including pregnancy, sexual orientation, and gender identity), or religion in programs or activities that HHS directly operates or to which HHS provides federal financial assistance, you may file a complaint with the Office for Civil Rights (OCR) for yourself or for someone else.

To file a complaint of discrimination for yourself or someone else regarding a program receiving federal financial assistance through HHS, complete the form on line through OCR's Complaint Portal at <https://ocrportal.hhs.gov/ocr/>. You may also contact OCR via mail at: Centralized Case Management Operations, U.S. Department of Health and Human Services, 200 Independence Avenue, S.W., Room 509F HHH Bldg., Washington, D.C. 20201; fax: (202) 619-3818; or email: OCRmail@hhs.gov. For faster processing, we encourage you to use the OCR online portal to file complaints rather than filing via mail. Persons who need assistance with filing a civil rights complaint can email OCR at OCRmail@hhs.gov or call OCR toll-free at **1-800-368-1019**, TDD 1-800-537-7697. For persons who are deaf, hard of hearing, or have speech difficulties, please dial 7-1-1 to access telecommunications relay services. We also provide alternative formats (such as Braille and large print), auxiliary aids and language assistance services free of charge for filing a complaint.

The Missouri Department of Social Services is an equal opportunity provider.

Hearings Information

If the Family Support Division changes or stops your benefits and you think the change is wrong, you can ask for a hearing. To do this, contact us by phone or in person.

- Visit: dss.mo.gov/fsd/know-your-rights or dss.mo.gov/dls/hearings
- Call: **855-FSD-INFO** (855-373-4636)