More Information

The Department for Community Based Services (DCBS) within the Cabinet for Health and Family Services (CHFS) determines if a participant meets the financial limits for Medicaid and how much *patient liability* they can afford to pay.

If you have questions about *patient liability* or disagree with the amount you must pay, you can call DCBS at (855) 306-8959.

Department for Medicaid Services

Division of Long-Term Services and Supports

275 East Main Street, 6W-B

Frankfort, KY 40621

(502) 564-7540

TEAM
KENTUCKY.
CABINET FOR HEALTH
AND FAMILY SERVICES

Keeping Your Medicaid Coverage

A guide to patient liability for participants in Kentucky's 1915(c) Home and Community Based Services (HCBS) Waivers

What is *patient liability?*

Patient liability is a monthly amount of money **some** waiver participants pay to help cover the cost of waiver services. Patient liability is based on a participant's income.

Who pays *patient liability?*

Medicaid sets limits on the amount of income a participant can keep and still qualify to be part of the program. If a person who needs waiver services has more income than Medicaid allows, *patient liability* helps them meet those limits.

How Medicaid calculates patient liability

Medicaid looks at your income and subtracts several different amounts of money from it. Those amounts include:

Money for your personal needs. The amount you are allowed to keep for personal needs can change each year.

Money for the needs of your spouse and/or family.

Money for your medical expenses and/or health insurance premiums.

The amount left after Medicaid subtracts the above amounts from a participant's income is considered *patient liability*.

What Medicaid counts as "income"

⇒ Any pay you earn
⇒ Any investments you have
⇒ Any rental property you own
⇒ Any pension plans you have
⇒ Any benefits you receive such as Social Security, Black Lung or Railroad Retirement benefits, or a Veteran's Administration pension

How participants pay *patient liability*

1. After you receive a waiver service, your provider sends a bill to Medicaid.

2. Medicaid subtracts part of your *patient liability* from what it pays the provider.

3. The provider collects the amount Medicaid did not pay from you. Your providers will do this until you have paid your full *patient liability* for the month.

Here is an example:

⇒ Jane has a monthly *patient liability* of **$100.**

⇒ After Jane receives a waiver service, the provider bills Medicaid **$200.**

⇒ Medicaid pays the provider **$175.**

⇒ The provider collects the remaining **$25** from Jane.

⇒ Jane will continue to pay her providers until she reaches **$100** total. The process starts over the next month.

Important Note: If you do not pay your full *patient liability* each month, *you will lose waiver services.*