

MERP Script in English

I want to take a few minutes to explain an important state program called the Medicaid Estate Recovery Program, or MERP. You need to be aware of this program because it affects the program that you are applying for today, which is:

[check the box that applies]

<input type="checkbox"/>	Community Based Alternatives (CBA)
<input type="checkbox"/>	Community Attendant Services (CAS)

Let me explain why we have MERP.

Medicaid is a government program that pays for health care services. Services provided could include helping people stay in their own home or moving to a facility, such as a nursing home, if that is what they need. These services can be very expensive. Federal law requires the state to recover the money spent for your care, whenever possible. After your death, a Medicaid claim may be filed to recover the cost of your care. That program is called MERP. MERP applies even if you have a will.

MERP only applies to the services you receive after the age of 55. The Medicaid claim is filed against your estate, which is property, such as money, a house or other things of value that a person leaves to family members or others (heirs). MERP does not apply to all property that a person may own, such as life insurance policies that name a person to receive the payment, or bank accounts that are paid on death to another person.

In some cases, the state may not ask for anything back. The state will never ask for more money back than it paid for your services. There are situations when the state will not ask for any money back after your death, for example, if your spouse is still alive, the value of your estate is \$10,000 or less or the amount of your Medicaid costs was \$3,000 or less. The state also makes some exceptions for hardships.

Form 8001, Medicaid Estate Recovery Program Receipt Acknowledgement, explains the MERP program in more detail. I will be asking that you sign and date the form. Signing the form will show that you have received information about MERP. If you choose not to sign, your application cannot be denied for that reason, but it is also important to know that if you accept services, the state may still file a claim against your estate after you die. Would you like to take a moment to read Form 8001, or are you ready to sign the form?

[If the individual chooses to sign Form 8001 at this point, obtain the individual's signature on Form 8001 and proceed to the section asking if the individual has any other questions. If the individual chooses to read Form 8001, allow time for the individual to do so. If the individual still has questions after reading the form, once again review the brief overview of MERP with the individual. Once the individual has read or reviewed the form, proceed to the statement asking the individual to sign the form.]

Now that you have read and reviewed Form 8001, I am asking that you sign it to show that you received the information.

[Offer the individual the opportunity to sign Form 8001, if not signed after the brief overview. If the individual does not choose to sign the form, document on Form 8001 the individual's refusal to sign the form.]

Do you have any other questions about MERP?

[You may respond to general questions if the answer is on Form 8001, but not to questions related to the individual's specific circumstance or estate.]

If you have other questions or need additional information about the estate recovery program, you may call the telephone number or visit the website listed on Form 8001, or you can call the:

- Department of Aging and Disability Services consumer hot line at 1-800-458-9858 (listen to menu option #4 or wait for a representative to assist you); or
- Legal hot line for Texans at 1-800-622-2520 (available to persons age 60 and over; Medicare beneficiaries, regardless of age; and low-income victims of violent crime).

Here is a copy of the MERP brochure, *Your Guide to the Medicaid Estate Program*. It also provides general information about MERP.

Finally, after you pass away, the state will need to contact the executor of your estate or other individual to see if a claim should be filed. The state would like to have the names of two individuals.

[Ask the individual for contacts in this order: (1) executor, (2) legal guardian, (3) power of attorney or (4) other family members who have acted on behalf of the individual. Document the relationship of the contact named, and the contact's name, address and phone number in the space below. If the individual has an executor identified and recorded in SAS and you confirm the information is current, you do not need to request the executor information. Indicate by the first contact's name that the executor information is recorded in SAS. Request the information for the second contact and record it below.]

Executor/Contacts For: <i>[enter individual's name]</i>
Date Contact Information Obtained:
Name of Staff who Obtained the Information:
First Contact's Name:
Recorded in SAS: <input type="checkbox"/> Yes <input type="checkbox"/> No
Relationship: <input type="checkbox"/> Executor <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Other Family Member
Address:
Phone Number:
Second Contact's Name:
Relationship: <input type="checkbox"/> Executor <input type="checkbox"/> Legal Guardian <input type="checkbox"/> Power of Attorney <input type="checkbox"/> Other Family Member
Address:
Phone Number: