HOSPITAL DISCHARGE AND NURSING HOME ISSUES

by

TAMMY ROSE LAWLOR

Partner, Miller & Milone, P.C.

Garden City

HOSPITAL DISCHARGE AND NURSING HOME ISSUES

I. <u>Hospital Discharge</u>

- A. Admission:
 - 1. No right to admission to a particular hospital but MUST be provided with care in an emergency.

a. Federal Law 42 U.S.C. § 1395dd (e)(2)

Emergency Medical Treatment and Labor Act a/k/a Anti-Dumping Act provides that hospitals participating in the Medicare program that have emergency departments must provide treatment in order to stabilize the patient and can only transfer the patient once stable.

b. Public Health Law § 2805-b

expands a patient's rights and provides that "every general hospital shall admit any person who is in need of immediate hospitalization with all convenient speed and shall not before admission question the patient or any member of his or her family concerning insurance, credit or payment of charges, provided, however, that the patient or a member of his or her family shall agree to supply such information promptly after the patient's admission."

1. According to **PHL § 3001 (1),** "emergency medical service" means initial emergency medical assistance including, but not limited to, the treatment of trauma, burns, respiratory, circulatory and obstetrical emergencies.

- 2. Sources of Admission:
 - a. Through the Emergency Room, or
 - b. Directly accepted as a patient.
- 3. Once Admitted as a patient, certain rights commence and the rules and regulations take effect.
 - a. Patient's Bill of Rights
 - 1. Public Health Law § 2803-c
 - b. Prior to discharge, hospital patients must receive a written notice that the hospital has determined that hospital care is no longer medically necessary and a written discharge plan with the reasons for discharge. The notice must also state that the patient has a right to request a review of this determination. **Public Health Law § 2803-i.**
 - c. **NYCRR § 405.9** Outlines all of the particular rules regarding admission and discharge.
 - d. The discharge plan must meet the patient's post-hospital care needs. If a patient requires continuing health care services, such services must be secured or determined by the hospital to be reasonably available to the patient. **10 NYCRR § 405.9(f)(1)**
 - e. Hospitals must make sure that no person that is admitted for medical care be removed, transferred or discharged based upon his/her ability to pay. 10 NYCRR § 405.9(f)(7)

- B. Discharge:
 - 1. Medical Necessity determines Discharge.
 - a. Medicare defines "medical necessity" as services or items reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.
 - 2. Insurance, Medicaid, and Medicare:
 - a. place limitations on when services are no longer covered;
 - b. determine the # of days that the patient will have coverage;
 - c. HINN letter (Hospital Issued Notice of Non-Coverage)
 - 3. Financial Motivation to leave
- C. Miscellaneous:
 - 1. Guardianships Hospitals Petition if:
 - a. Incompetent/Incapacitated; or
 - b. Family member is abusing or misusing power.
 - 2. Elder Law attorneys need to arrange for client's discharge into a Nursing Home (which will be discussed later), Rehabilitation Facility or to their Home. Need familiarity with:
 - a. HIPAA Authorization
 - b. Insurance Issues should be familiar with filing appeals and IPRO
 - c. Geriatric Care Manager to assist
 - i. PRI Patient Review Instrument
 - a. Score determines your placement, based upon ADL's (activities of daily living)

II. <u>Nursing Home Issues</u>

- A. Admissions Agreement
 - 1. Parties to the Agreement:
 - a. "Resident" is the individual admitted to and who resides in a nursing home and who is entitled to receive care, treatment and services. **10 NYCRR § 415.2 (m)**
 - b. "Sponsor" is the agency or person or persons, other than the resident, responsible in whole or in part for the financial support of the resident, including the costs of care in the facility.
 10 NYCRR § 415.2 (s)
 - c. "Designated Representative" is the individual or individuals designated in accordance with this subdivision to receive information and to assist and/or act on behalf of a particular resident to the extent permitted by State law; it being understood that a designated representative specified in subparagraph (1) (iii) of this subdivision is not a health care agent as defined in Article 29-C of the Public Health Law.
 - i. Such individual or individuals shall be designated, with such designation noted in the clinical record:
 - a. by a court of law when the designation of an individual, committee or guardian has been sought;

- b. by the resident if the resident has the capacity to make such designation; or
- c. by family members and other parties who have an interest in the well-being of the resident who, after discussion with the facility, identify the individual or individuals most personally involved in the resident's care, if the resident lacks the capacity to make such designation.
- ii. The designated representative shall:
 - a. Receive any written and oral information required to be provided to the resident if such resident lacks the capacity to understand or make use of such information, and also receive any information required to be provided to both the resident and the designated representative; and
 - b. Participate to the extent authorized by State law in decisions and choices regarding the care, treatment and wellbeing of the resident if such resident lacks the capacity to make such decisions and choices. 10 NYCRR § 415.2 (f)(2)(ii)

- d. "Responsible Party" and Financial Agent defined by contract as an individual who has legal access to a resident's income or resources available to pay for facility care, to sign a contract, without incurring financial liability, to provide the facility payment from the resident's income or resources.
 10 NYCRR § 415.3 (b)(6)
- e. "Financial Agent" defined by contract typically limited access to resources.
 - (1) Trust
 - (2) **Power of Attorney**
 - (3) Joint Accounts or convenience accounts
- 2. Financial Disclosure:
 - a. Identifies the proper parties listed in previous section for purposes of the Admission Agreement.
 - b. Confirms sources of payment:
 - i. Private pay;
 - ii. Insurance or Supplemental Coverage;
 - iii. Medicaid recipient:
 - a. Need to verify assets and any prior transfers to determine eligibility.
 - b. Medicaid planning: residents or potential residents shall not be required to waive their rights to Medicare or Medicaid benefits [Nursing Homes] shall not require oral or written assurance that residents or potential residents are not eligible for, or will not apply for Medicare, or Medicaid benefits.

10 NYCRR § 415.3

- 3. Liability for Payment to Nursing Home:
 - a. Responsible Party Liability

ii.

- i. NY General Obligations Law Fraudulent Conveyance
- ii. Breach of Contract
- b. Third-Party Guarantee Prohibited
 - i. A Nursing Home shall not require a third-party guarantee of payment to the facility as a condition of admission, or expedited admission, or continued stay in the facility.
 - 42 U.S.C. § 1396r (c) (5) (A) (ii) [Nursing Home] shall not charge, solicit, accept or receive, in addition to any amount otherwise required to be paid by third-party payors, any gift, money, donation or other consideration as a precondition of admission, expedited admission or continued stay in the facility except that arrangements for prepayment for basic services not exceeding three months shall not be precluded by this paragraph. 10 NYCRR § 415.3 (b) (2)
- B. Bed-Hold Policy: Prior to discharge or transfer, a facility must notify a resident in writing of the facility's bed-hold policy. 42 U.S.C. § 1396r (c)(2)(D); 42 C.F.R. § 483.12(b); 10 NYCRR § 415.3(h)(4)
 - 1. A private paying resident can hold their bed at the private-pay rate.
 - 2. Medicaid reimburses nursing home up to 15 days (can be extended to 20 days).
 - 3. DOH requires priority to former residents.
 - 4. Nursing Homes may use to dump non-paying

resident.

- C. Discharge
 - 1. Definition:
 - a. Discharge is defined as movement of a resident to a bed outside of the certified facility. 42 C.F.R. § 483.12(a)(1); 10 NYCRR § 415.3 (h)
 - 2. Regulations regarding Discharge:
 - a. Federal law and regulations provide that a Nursing Home must permit each resident to remain in the facility and must not transfer or discharge the resident unless: 42 USC 1396r(c)(2); 42 C.F.R. § 483.12(a)(2)
 - i. the transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met in the facility;
 - ii. the discharge is appropriate because the resident's health has improved sufficiently so that the resident no longer needs the services provided by the facility;
 - iii. the safety of the individuals in the facility is endangered;
 - iv. the health of individuals in the facility would be otherwise endangered;
 - v. the resident has failed, after reasonable and appropriate notice, to pay for a stay at the facility; or
 - vi. the facility ceases to operate.

- b. According to New York Law a Nursing Home may not transfer or discharge a resident unless: 10 NYCRR 415.3 (h)(1)(i)(a)
 - the transfer or discharge is necessary for the resident's welfare and the resident's needs cannot be met after reasonable attempts at accommodation in the facility;
 - ii. the transfer or discharge is appropriate because the resident's health has improved sufficiently so the resident no longer needs the services provided by the facility; or
 - iii. the health or safety of individuals in the facility would otherwise be endangered, the risk to others is more than theoretical and all reasonable alternatives to transfer or discharge have been explored and have failed to safely address the problem.
- 3. Notice of Discharge
 - a. Federal law requires before effecting a transfer or discharge of a resident, the nursing home must notify the resident in writing of the discharge and the reasons and must record the reasons in the resident's clinical record. 42 USC 1396r(c)(2)(B)(i); 42 C.F.R. § 483.12(a)(4)
 - i. Requirements:
 - a. If the immediate family member or the resident or legal representative are known they must also be notified.

- b. The notice of discharge must be made at least 30 days before the resident's transfer with few exceptions including when the safety of individuals in the facility is endangered. 42 USC 1396r(c)(2)(B)(ii); 42 C.F.R. § 483.12(a)(5)(i)
- The written notice of C. discharge must state the effective date of discharge, the reason for discharge, the location to which the resident is discharged, the right of the resident to appeal the action by a hearing; and the name, address and telephone number of the State long term care ombudsman. 42 USC 1396r(c)(2) (B)(iii); 42 C.F.R. § 431.200(c)(1) and § 483.12(a)(6)
- d. The notice must also cite the specific regulations that support the intended action.
 42 C.F.R. § 431.210(c)
- b. New York State law also requires that before effecting a transfer or discharge of a resident, the nursing home must notify the resident in writing of the discharge and the reasons and must record the reasons in the resident's clinical record. 10 NYCRR 415.3 (h)(1)(iii)(a) and (b)

- i. Requirements:
 - a. If the immediate family member or the resident or legal representative are known they must also be notified.
 - b. The notice of discharge must be made at least 30 days before the resident's transfer with few exceptions including when the safety of individuals in the facility is endangered. 10 NYCRR 415.3(h)(1)(iv)
 - c. The notice must include a statement that the resident has a right to appeal the action to the State Department of Health.
- 4. Appeal/Hearing
 - a. Federal regulations require that the state agency must grant an opportunity for a hearing to any resident who requests it because he or she believes a skilled nursing facility has erroneously determined that he or she must be transferred or discharged. 42 C.F.R. §§ 431.200(c)(1), 431.220(a)(3) and 483.204
 - i. Requirements:
 - a. The agency may not limit or interfere, with appellant's right to make a request for a hearing and may assist the appellant with this request.

42 C.F.R. §§ 431.221(b) and(c)

- b. The agency must allow the appellant a reasonable time, not to exceed 90 days from the date that notice of action is mailed, to request a hearing. **42 C.F.R. § 431.221(d)**
- The hearing must be held c. before the Medicaid agency; or to be held as an evidentiary hearing at the local level, with a right of appeal to a State agency hearing. The hearing system must meet the due process standards set forth in Goldberg v. Kelly, 397 U.S. 254 (1970), plus all additional standards established in the federal regulations. **42 USC** 1396r(e)(3); 42 C.F.R. § 431.205
- d. The appellant must be given the opportunity to examine the content of the appellant's case file; all documents and records to be used by the State or local agency; bring witnesses; present an argument without undue interference; and question or refute any testimony or evidence, including opportunity to confront and cross examine adverse witnesses. 42 C.F.R. § 431.242

- e. An appellant may represent himself or use legal counsel.
 42 USC 1396r(e)(3); 42 C.F.R. §§ 431.206(b)(3) and 431.242
- f. Additional Hearing requirements are outlined in 42 C.F.R. § 431.240
- g. The agency may deny or dismiss a request for a hearing only if the applicant or recipient withdraws the request for the hearing or fails to appear at a scheduled hearing without good cause. 42 C.F.R. § 431.223
- b. New York State regulations provide that the resident of a nursing home has a right to a "pretransfer appeal determination" under the auspices of the Department of Health. 10 NYCRR 415.3(h)(2)(i)(a)
 - i. Requirements:
 - a. NYS does not provide for hearings on appeal as required by the federal regulations.
 - b. Without requiring a hearing, the state regulations require that the department conduct a review and render a decision on appeal within 15 days of the request. 10 NYCRR 415.3(h)(2)(v)

- 5. Notice of Decision in Writing
 - a. Federal regulations require that the agency must notify the applicant or recipient in writing of the decision and his right to request a state agency hearing, if the hearing was conducted by the local agency, or seek judicial review, to the extent that either is available to him. **42 C.F.R. § 431.245**
- D. Nursing Homes Options to Seek Payment for Services 1. Hardship waiver
 - a. Undue hardship exists when an
 - i. Individual is deprived of medical care such that their life or health will be endangered, or an
 - ii. Individual is deprived of food, clothing, shelter or life necessities
 - b. States are required to institute a process
 - i. Notice to recipients that undue hardship exists
 - ii. Timely process for determining if waiver will be granted
 - c. Facilities may apply for waiver for Resident
 - i. Need consent of resident or designated representative
 - ii. Hardship is only for hardship to resident, not the facility

- 2. Fraudulent Conveyances
 - a. In **N.Y.S.S.L. § 366** there is a presumption that transfers for less than fair consideration within the look back period, were made to qualify for Medicaid
 - b. According to **D.C.L. § 273**, to establish a case of fraudulent conveyance it must be determined whether the
 - i. Conveyance was made without fair consideration
 - ii. Conveyance was made with intent to defraud creditors
 - iii. Conveyance rendered the resident insolvent.
 - **Responsible Parties:**

3.

- a. Spouse if patient/resident does not have sufficient means
- b. Designated Representative who signed the Admissions Agreement or Power of Attorney but only to the extent he/she has access to the patient/resident's funds

Table of Authorities

```
    Federal Law 42 U.S.C. § 1395dd(e)(2)
```

```
- Public Health law § 2805-b
```

```
- Public Health law § 3001
```

```
- Public Health Law § 2803-c
```

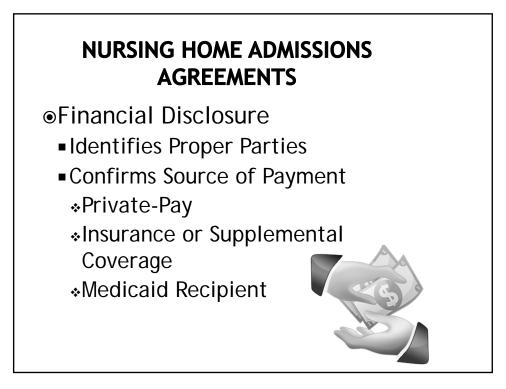
- Public Health Law § 2803-i
- 10 NYCRR § 405.9(f)(1)
- 10 NYCRR § 405.9 (f)(7)
- 10 NYCRR § 415.2 Definitions
- 10 NYCRR § 415.3 Resident's Rights

```
- 42 U.S.C. §1396r (c)(5)(A)(ii)
```

- 42 U.S.C. § 1396r (c)(2)(D)
- 42 C.F.R. § 483.12(b)
- 42 C.F.R. § 483.12(a)(4)
- 42 C.F.R. § 483.12(a)(6)
- 42 C.F.R. § 431.200(c)(1)
- 42 C.F.R. § 431.210(c)
- 42 C.F.R. § 431.220(a)(3)
- 42 C.F.R. § 483.204
- 42 C.F.R. § 431.221(b)(c)(d)
- 42 U.S.C. § 1396r(e)(3)
- 42 C.F.R. § 431.205
- 42 C.F.R. § 431.242
- 42 C.F.R. § 431.206(b)(3)
- 42 C.F.R. § 431.240
- -42 C.F.R. § 431.223
- 42 C.F.R. § 431.245

NURSING HOME ADMISSIONS AGREEMENTS

- Parties to the Agreement
 - <u>Resident</u> (10 NYCRR § 415.2)
 o Individual admitted.
 - Sponsor (10 NYCRR § 415.2)
 - Agency or person responsible for financial support of the resident.
 - Designated Representative (10 NYCRR § 415.2)
 - Individual(s) designated to receive information and to assist and/or act on behalf of resident.
 - <u>Responsible Party</u> (10 NYCRR §415.3(b)(6))
 Individual who has legal access to a resident's income or resources to provide payment to the facility.
 - Financial Agent
 - Defined by contract.



NURSING HOME ADMISSIONS AGREEMENT



Liability for payment to Nursing Home

- Residents are liable for care received.
 - A resident with full mental capacity who signs an Admission Agreement that includes a promise on the part of the resident to pay privately for his/her care, or to apply for government benefits is liable for care received.

LIABILITY FOR PAYMENT TO NURSING HOME

- Liability of Resident's Spouse
 - <u>Doctrine of Necessaries</u>
 - There is a reciprocal duty upon each spouse to furnish the other with reasonable necessaries, including medical care.
 - * Med. Bus. Assoc., Inc. v. Steiner, 183 A.D.2d 86, 87 (N.Y.S.2d 1992)
 - The spouse who received the necessary goods or services should be primarily liable for payment.
 - A creditor seeking to recover a debt against the non-resident spouse must demonstrate that:
 - The non-resident spouse has the ability to pay for the debt; and
 - That an attempt was made to secure payment from the debtor spouse first.
 - <u>N.Y. Gen. Oblig. Law § 3-305</u>
 - A contract made by a married woman does not bind her husband or his property.

LIABILITY FOR PAYMENT TO NURSING HOME

• Liability of Resident's Spouse

- The Family Court Act Section 412
 - A married person is chargeable with the support of his or her spouse and, if possessed of sufficient means or able to earn such means, <u>may be required</u> to pay for the support in a fair and reasonable sum, as the Court may determine, having due regard to the circumstances of the respective parties.
- However, Section 422 of the Family Court Act states that the parties who have standing to assert this claim are not third parties such as creditors.
- Family Court has exclusive jurisdiction over spousal claims that arise from Section 412.

LIABILITY FOR PAYMENT TO NURSING HOME

- Third party liability for nursing home bills
 - Federal Nursing Home Reform Act
 - A nursing home is <u>prohibited</u> from requiring a third party to guarantee payment to the facility as a condition of admission of another party.
 - o Any child who signs a guarantee can later disavow.
 - Sometimes nursing homes will "require" a child to guarantee payment for the cost of a parent's care in the nursing home.
 - Third parties can have access to resident's funds through:
 - Power of Attorney
 - Joint Bank Account
 - Appointment as Guardian

LIABILITY FOR PAYMENT TO NURSING HOME

 However, a child <u>can</u> be held responsible for reneging on a written promise to a nursing home to apply the *parent's own assets* towards the cost of the parent's nursing home.

 Troy Nursing & Rehabilitation Ctr., LLC v. Naylor (2012 NY Slip Op. 03243, App. Div. 3rd Dept., April 26, 2012)

- Daughter signed an agreement wherein she promised, as agent under her father's power of attorney, to use her father's assets to pay for her father's care in the facility.
- Daughter reneged and the nursing home filed suit against her.

 The court distinguished between a child's guarantee to use her *own assets* to pay for care and a promise to use the *resident's own assets* to pay for care.

LIABILITY FOR PAYMENT TO NURSING HOME

• Other important case law:

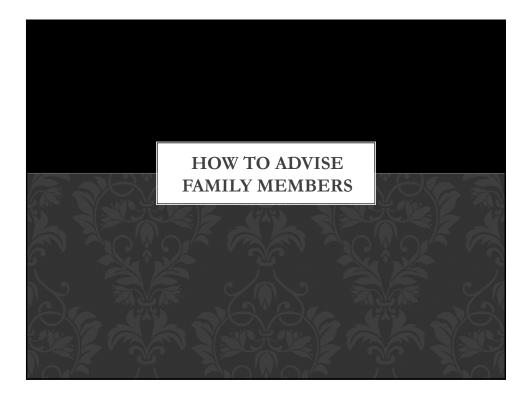
- Prospect Park Nursing Home v. Goutier, 12 Misc. 3d 1192
 - Power of Attorney who signed an admission agreement can be held liable to a nursing home for breach of contract if he failed to turn over funds actually received by him that he has the legal authority to use (i.e. under the power of attorney)
 - If Power of Attorney does not have access to sufficient funds belonging to the resident to cover the resident's nursing home bill, the Power of Attorney who signed the admission agreement could not be held liable to the facility.
 - However, it is not enough to have legal access to funds, there must also be income or resources available to pay for the care.
- <u>Amsterdam Nursing Home v. Lang, 16 Misc. 3d 1138</u>
 - Proof of access to the resident's funds is a pre-requisite to finding the signer of an admission agreement liable for the resident's nursing home bill.

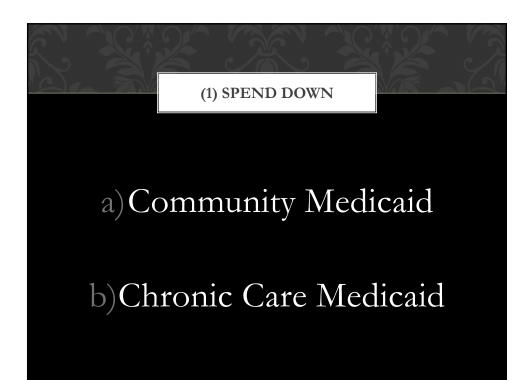
LIABILITY FOR PAYMENT TO NURSING HOME

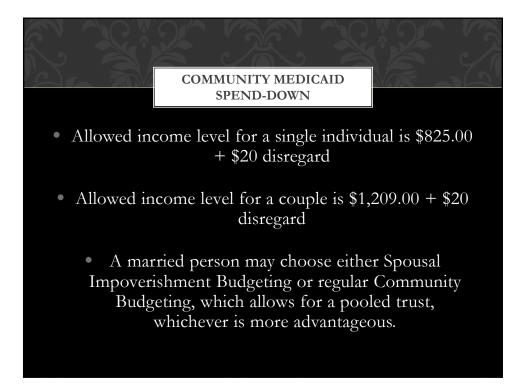
- Hillside Manor Rehab. & Extended Care Center LLC v. Barnes (Queens)
 - Mother added daughter's name to bank account prior to admission to nursing home.
 - Mother then became resident of the nursing home before passing away.
 - Following her passing, the nursing home sent bills to daughter for unpaid NAMI. When bills remained unpaid, the nursing home sued the daughter to recover \$6,830.40 alleging that she had access to the mother's funds which should have been paid to the nursing home.
 - Daughter used the funds to pay household bills to maintain her mother's home.
 - Daughter never signed a contract with the nursing home to pay bill from the mother's funds.
 - Court found that there was no evidence of an agreement requiring the daughter to pay the nursing home from the joint account or from any of the mother's assets or resources.
 - Even if such an agreement existed, there could be no personal financial liability to defendant because Federal and State regulations prohibit nursing homes from requiring a third party guarantee as a condition to admission.

LIABILITY FOR PAYMENT TO NURSING HOME

- Third Party Liability Conclusions:
 - An admission agreement can only require the signer to use his/her access to the resident's funds
 - Can also have a clause requiring assistance with documentation to the resident's Medicaid application
 - If the signer does not have access to the resident's funds, that individual may not have liability to the facility under a breach of contract cause of action.







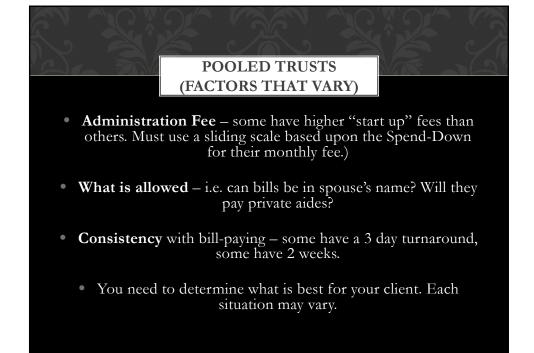


POOLED TRUST -HOW IT WORKS

a) After calculating Gross Income less any Deductions, your spenddown may be sent to a Pooled Trust.

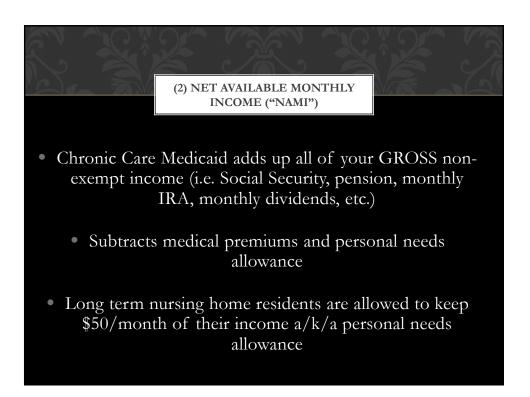
- b) Pooled Trust can pay any non-medical bills in applicant's name, i.e. utilities, real estate taxes, and rent. Trust may also pay medical bills not covered by Medicare, private insurance, or Medicaid.
- Each month, the applicant's Spend-Down is sent to the Pooled Trust along with current bills up to your Spend-Down amount (less any monthly fees for the Trust). The Trust pays these bills directly.
 *THE TRUST MAY NOT PAY THE APPLICANT DIRECTLY.

OPTIONS OF <u>POOLED TRUSTS</u> **a)** NYSARC, Inc. Trust Services **b)** Life's WORC Trusts **c)** LIFE, Inc. Pooled Trust **d)** The Theresa Foundation Pooled Trust of New York **e)** Many more...(See attached list in materials)







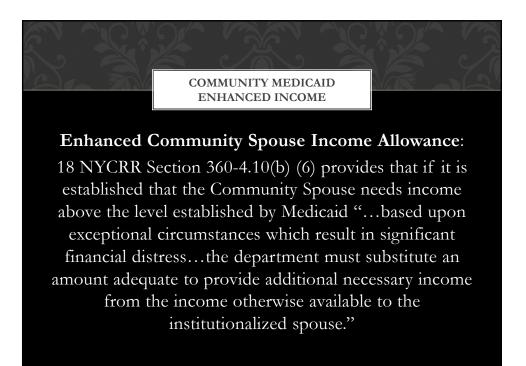


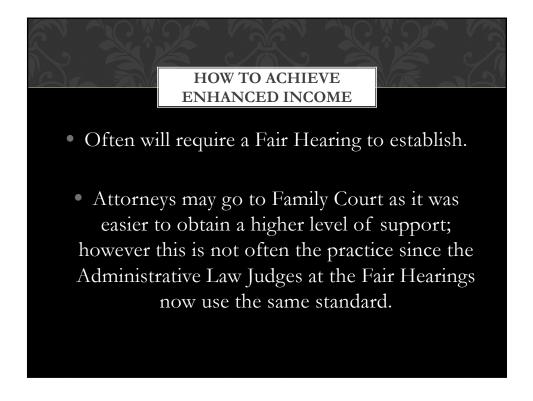
COMMUNITY MEDICAID SPOUSE INCOME

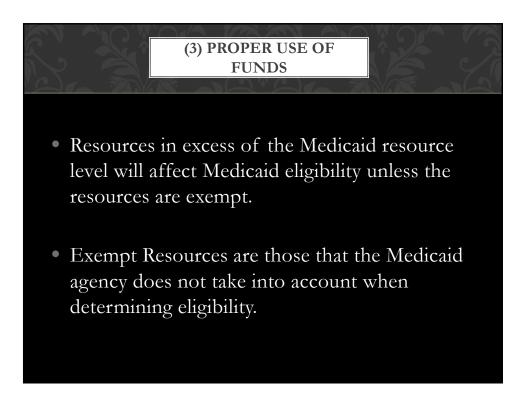
Community Spouse

The Community Spouse is permitted a Minimum Monthly Maintenance Needs Allowance ("MMNA") and as such may be allowed to keep some of their institutionalized spouse's income.

The Community Spouse Income Allowance ("CSIA") for 2016 is \$2,980.50 per month. If the Community Spouse's income is less than the CSIA, the Community Spouse will be allowed to keep the amount of their institutionalized spouse's income that will bring him/her up to that level

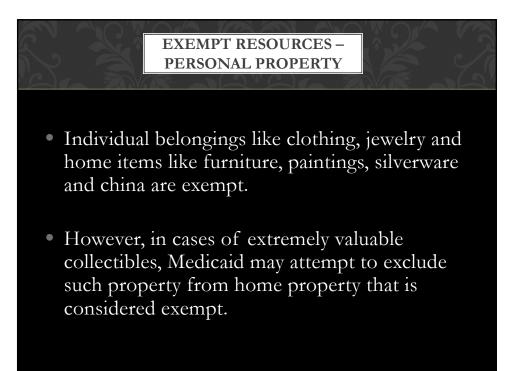


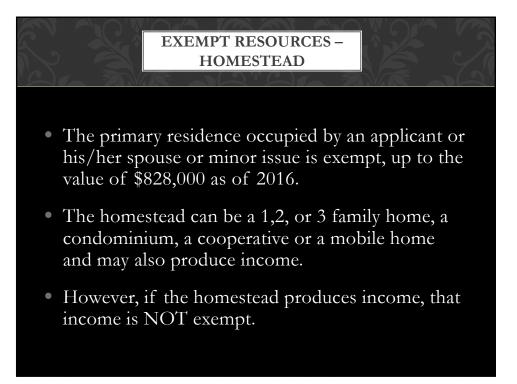




EXEMPT RESOURCES – BURIAL ALLOWANCE

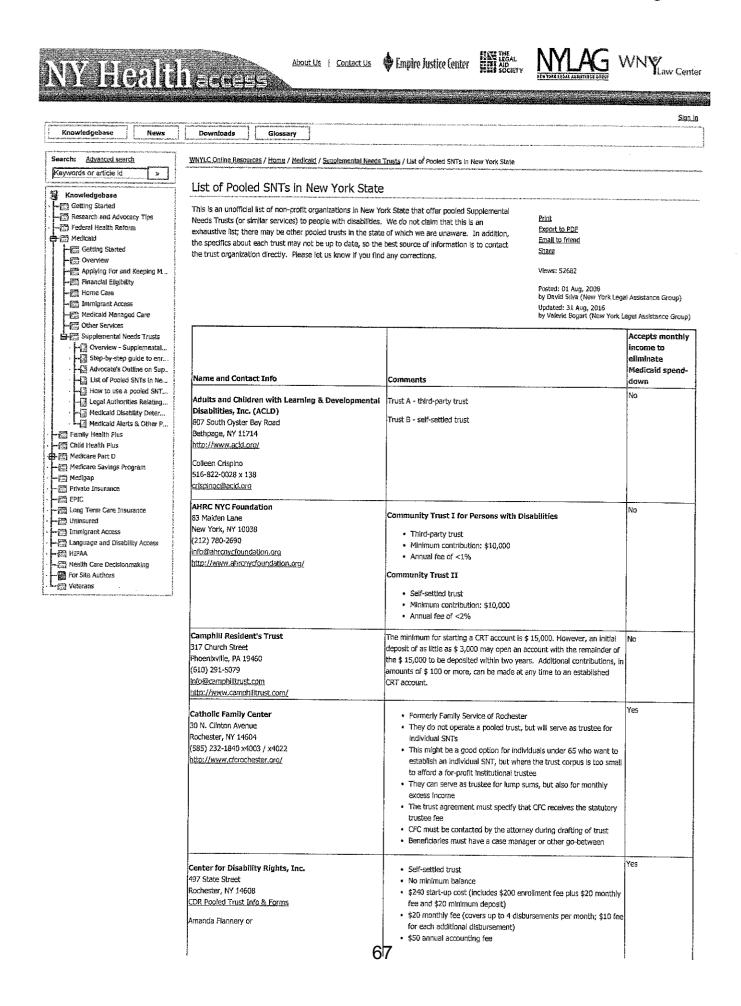
- A Medicaid applicant can have a combination of a cash burial allowance and life insurance that has a face value of less than \$1,500.
- Burial space items such as a grave, headstone, engraving, casket, grave opening and perpetual care are also Exempt Resources.
- Medicaid applicants may also pre-pay funeral and burial expenses with an Irrevocable Medicaid Pre-Needs Trust.











List of Pooled SNTs in New York State - New York Health Access

Ph: (585) 546-7510 Fax: (585) 546-7567 / (585) 546-7560		
Community Living Corporation (CLC) 600 Bedford Road Mt. KIsco, NY 10549 (914) 241 2076 (ctofoundation@optionline.net http://www.dcpooledtrust.org	 Pooled Trust 1 Pooled Trust 1 is a third-party SNT, established with funds provided by a family member or friend. Minimum Deposit: \$10,000 One-time enroliment fee \$200 \$1,000 annual fee for accounts under \$25,000 For accounts over \$25,000, annual fee of not less than \$1,000 to be negotiated with trustee Pooled Trust 2 	Yes
	 Pooled Trust 2 is a self-settled SNT, established with funds provided by the beneficiary. Minimum Deposit: \$5,000 One-time enrollment fee \$250 \$1,000 annual fee for accounts under \$50,000 For accounts over \$50,000, additional annual fee of 1% of balance in excess of \$50,000 	
Disabled and Alone / Life Services for the Handicapped, Inc. 61 Broadway, Suite 510 New York, NY 10006 Ph: (212) 532-6740 / (800) 995-0066 Fax: (212) 532-3588 http://www.disabledandalone.org/	 Third-party trust Minimum deposit: \$100,000 	No
Future Care Community Pooled Trust (A partnership of Al Sigi Community of Agencies, Lifespan and the Arc of Monroe) 1000 Elmwood Avenue Rochester, NY 14620 T: 585-402-7840 Ext 2 http://www.futurecareplanning.org/	Must Reside in Monroe County or surrounding counties to be able to foin this trust 1st Party Lump Sum Pooled Trust • \$200 enrollment fee • \$3000 minimum opening deposit (\$2000 if on SSI) • 1.235% annually for investment services • 0.75% annually for administrative fee • \$30.00 per month additional fee if trust is used for monthly disbursements 1st Party Spend Down Pooled Trust • \$200 enrollment fee • \$100 Minimum balance • \$30 per month includes 4 disbursements (\$5 per additional disbursement) • \$50 annual audit fee 3rd Party Pooled Trust • \$500 minimum opening deposit • \$100 Minimum balance • \$50 annual audit fee 3rd Party Pooled Trust • \$5000 minimum opening deposit • \$100 minimum opening deposit	Yes (1st Party Spend Down Poole Trust)
CTS Pooled Trust 3011 Avenue K Brooklyn, NY 11210 Phone: (718) 475-5000 FAX: (718) 475-5010 Email: Info@ktstrust.org Ittp://ktsrust.org/	 \$250 enrollment fee Monthly fee of 10% of required monthly deposit (minimum \$30, maximum \$200) Annual renewal fee of \$100 Monthly contributions can be made by ACH direct debt from bank account No minimum balance No minimum funding 	Yes
CG Community Trust CG Community Services, Inc. 4 Mount Hope Place Ironx, NY 10453-6102 718) 466-2200 If@@lcgcs.org Ittp://www.lcgcs.org/	 Community Trust 1 – Self-Directed Asset Trust \$25,000 minimum contribution within 12 years of enrollment Enrollment fee of 1% of initial deposit (minimum \$250) Monthly administrative fee of 2% of funds on deposit (minimum \$42) Monthly brokerage fee of 0.042% Annual renewal fee of \$100 Annual renewal fee of \$100 Can designate remainder beneficiaries to receive no more than 50% of corpus remaining on disabled beneficiary's death Community Trust II – Third Party Asset Trust \$250 om/nimum contribution within 12 years of enrollment \$250 enrollment fee 	Yes (Community Trust II and III)

•

	 Monthly administrative fee of 2% of funds on deposit (minimum \$42) Monthly brokerage fee of 0.042% Annual renewal fee of \$100 Annual audit and tax return fee of \$100 Can designate remainder beneficiaries to receive no more than 50% of corpus remaining on disabled beneficiary's death Community Trust III – Medicaid Spend-Down Trust Minimum monthly deposit: \$500 \$250 enrollment fee Monthly administrative fee of 8.5% of required monthly deposit (minimum \$42.50) Annual renewal fee of \$100 Annual renewal fee of \$100 All funds remaining in the trust at beneficiary's death are retained by trustee organization 	
Life's WORC Trusts 1501 Franklin Avenue PO Box 8165 Garden City, NY 11530 516-741-9000 ext. 225 516-348-7878 Fax: (516) 302-1802 Email: trustservices@lifesworc.org http://www.lifesworctrust.org/	Self-Settled Trust (Community Trust 1) Self-settled trust Minimum deposit: \$500 One-time enrollment fee of \$250 Annual fees: Up to \$20,000 - 5% of Account Balance; \$20,000 to \$50,000 - \$1000; \$50,000 and above - additional 1% of balance over \$50,000 	YES (Community Trust 3 only)
	 Third-Party Pooled Trust (Community Trust 2) Third-party trust Minimum deposit: \$10,000 One-time enrollment fee of \$250 Annual fees: Up to \$20,000 - 5% of Account Balance; \$20,000 to \$50,000 - \$1000; \$50,000 and above - additional 1% of balance over \$50,000 	
	 Surplus Income Pooled Trust (Community Trust 3) Excess Income Trust Minimum deposit: \$300 One-time enrollment fee of \$250 Double the monthly deposit is required before expenses can be paid, with one month remaining available for bill pay Monthly administrative fees are based on monthly deposit amounts: Deposits up to \$500 - \$50 fee; \$501 to \$3000 - 10% of the monthly deposit; \$3001 to \$4000 - \$300 fee; \$4001 and above please contact Life's WORC Pooled Trusts 	
JFE, Inc. Pooled Trust Labor & Industry For Education, Inc.) 112 Spruce St Zedarhurst, NY 11516 Felephone: (516) 374-4564 ext. 3 www.lifetrusts.org	LIFE offers: (1) a self-settled (i.e. established by the beneficiary) monthly spend-down trust (11) a self-settled asset trust and (11) a self-settled asset trusts and (11) third-party asset trusts • \$300 one time sign-up fee • \$200 annual fee from the second year on • Monthly fee depends on amount of the spend-down (set fee, not percentage) • No minimum deposit • Automated Monthly bill pay, • Trust established in 2 business days guaranteed • Process of bill requests in 3 business days guaranteed (no more late bills) • Dedicated trust counselor assigned to each trust client • Eillable_Joinder Agreement	Yes (Trust I)
IYSARC, Inc. Trust Services 93 Delaware Avenue elmar, NY 12054 elephone: (518) 439-8323 oli Free: (600) 735-8924 acsimile: (518) 439-2670 -mail: <u>trustdept@nvsarc.org</u> ttp://nysarctrustservices.org	Community Trust I • Self-settled trust • \$200 one-time enroliment fee - non-refundable • Minimum deposit: \$300 • \$25 annual fee charged every July for accounting • \$1/month Allocation Fee • Co-trustee fee of 0.75% annually charged at monthly rate of .0625% based upon balance at end of preceding month	Yes (Community Trust II)

List of Pooled SNTs in New York State - New York Health Access

Mailing address NYSARC Inc. Trust Services POB 1531	 Plus, the greater of: 0.9% annual rate, charged monthly at .075% of average monthly accels OP 	
Latham, NY 12110	monthly assets OR • Flat fee of \$10/mo.	
(for Fed Ex & UPS use Delmar address above)	Interded for lump-sums, not monthly spend-down Remainder at beneficiary's death is retained by trustee	
	Community Trust II	
	Self-settled trust	
	 \$200 one-time enrollment fee - non-refundable 	
	 DOUBLE the monthly spend-down, of which one month is available to pay expenses. The 2nd month must be on deposit like a security 	
	deposit	
	 \$50 annual fee charged every July for accounting \$1/month Allocation Fee 	
	 Pro rata share of annual audit, tax preparation costs for Trust 	
	 Co-trustee fee of 0.75% annually charged at monthly rate 	
	of .0625% based upon balance at end of preceding month	
	 Plus, the greater of: 0.9% annual rate, charged monthly at .075% of average 	
	monthly assets OR	
	 Flat fee ranging from \$30-\$240 depending upon amount of 	
	monthly contribution (for contributions over \$4,000, contact NYSARC to determine fee) <u>(Fee schedule posted</u> online)	
	Community Trust III	
	Self-settled trust	
	 No enrollment fee 	
	 Minimum deposit: \$250,000 Intended for humasums, not monthly spond-down 	
	 Intended for lump-sums, not monthly spend-down Monthly fee of 0.06% or 0.075% depending upon balance, plus 	
	trustee bank fee not to exceed 0.0625%	
	(0.75% annually)	
	 Remainder at beneficiary's death is subject to Medicaid recovery, but any amount remaining after that goes 25% to NYSARC and 	
	75% to designated beneficiarles	
	NYSARC Chart Comparing 3 Pooled Community Trusts	
	Unks to Documents for all 3 Pooled Community Trusts	
SCS Pooled Trust	\$250 Enrollment Fee	Yes
1404 Coney Island Avenue	 Monthly administrative fee of 10% of monthly required deposit 	
	(Min. \$25/Max. \$200)	
Brooklyn, NY 11230	Unlimited disbursements No Minimum balance requirement	1
Telephone: 718-971-2509	No Minimum funding requirement	
Fax: 844-623-0481	\$100 Renewal Fee	
www.info@senjorcommservice.org	Monthly deposits can be made by ACH Direct Debit	
www.seniorcommservice.org		
A THE REPORT AND A THE REPORT OF		
he Rose and Maurice Halpern Lifetime Care	The Lifetime Care Foundation Community Pooled Trust I	Yes
oundation at OHEL	Third-party trust	
56 Beach 9th Street	A portion of the funds can be invested	
ar Rockaway, NY 11691 '18 686 3170	 An initial deposit minimum of \$20,000 must be received in order for a client's funds to be invested. The first \$10,000 is kept in a 	
ttp://www.ohelfamily.org/?g=lifetime_care/pooled-trusts		
.ftrusts@ohelfamily.org	the liquid \$10,000 reaches a balance of \$0, money will be divested	
	from the Investment account to the liquid account in increments of \$10,000	
	The Lifetime Care Foundation Community Pooled Trust II	
	 Self-settled trust For those dlents wishing to deposit liquid assets into a trust in 	
	 For those clients wishing to deposit liquid assets into a trust in order to preserve government entitlements, while having a portion. 	
	of this money invested	
	An initial deposit minimum of \$20,000 must be received in order	
	for a client's funds to be invested. The first \$10,000 is kept in a liquid account, and the next \$10,000 is invested. At a point when	
	liquid account, and the next \$10,000 is Invested. At a point when	
	1 the liquid \$10,000 reaches a balance of \$0, money will be divested I	
	the liquid \$10,000 reaches a balance of \$0, money will be divested from the investment account to the liquid account in increments of \$10,000	
	from the investment account to the liquid account in increments of	

	 Can enable disabled individuals and seniors to use their excess income to pay for their own supplemental needs, such as rent, utilities, and medical services not covered by Medicaid and/or other entitlements programs Fees \$900 annual fee (first year's fee due at initiation) \$10 fee per check for any payments in excess of three per month For Trusts I & II only: Investment fees of approximately .75% from Bernstein Global Wealth Management 1% investment fund management fee (if placed in investment account) Annual investment fees: 1.5% for \$25,000-\$250,000 1% for the next \$250,000-1 Million 0.5% for additional amounts over 1 Million 	
The Theresa Foundation Pooled Trust of New York 250 Lido Boulevard Lido Beach, NY 11561 (516) 432-0449 http://www.theresafoundation.org Administered by The Center for Special Needs Trust Administration, Inc. 4912 Creekside Drive Clearwater, FL 33760 (877) 766-5331 http://www.centersweb.com http://centersweb.com/SNT/types_pooled_state.html	 The Theresa Pooled Trust Self-settled trust Annual fee of 2% of trust assets One-time administrative fee of \$2,500 Designed for sheltering lump-sums The Theresa Pooled Income Trust Self-settled trust One-time opening fee of \$175 Monthly service fee of \$25 - \$200, depending upon amount of monthly contribution Monthly maintenance fee of 0.875% of account balance Designed for sheltering excess Income The Theresa Foundation Community Trust Third-party trust 	Yes
UJA-Federation Community Trust Program Department of Planned Giving and Endowments 130 E. 59th street New York, NY 10022 http://www.ujafedny.org/ Stacy Ferber (212) 836-1150 ferbars@ujafedny.org Case management agency for trust beneficiaries: F+E+G+G+S - UJA-Federation Community Trust for Individuals with Disabilities 315 Hudson Street, 6th Floor New York, NY 10013 http://www.feas.org Ph (212) 366-8030 Fax (212) 366-8015	 Community Trust for Disabled Adults Third-party trust Minimum deposit: \$100,000, with at least \$20,000 invested initially with remainder to be deposited within 4 years Beneficiary is assigned an advocate from a UJA agency Annual feas: UJA-Federation administrative \$1,500/yr. and advocacy \$5,000/first yr. then \$3,000/yr. Upon the death of the beneficiary, 100% of the remainder is designated as per the Sponsor Community Trust II Self-settled trust Minimum deposit: \$50,000, payable over 5 years if necessary Beneficiary is assigned an advocate from a UJA agency if full advocacy services are selected Annual fees: UJA-Federation administrative \$1,500/yr. and financial only advocacy \$2,000/yr. or full advocacy \$5,000/first yr. then \$3,000/yr. Upon the death of the beneficiary, 50% shall be maintained in the Trust and the other 50% is first subject to a Medicaid right of recovery. If Medicaid has no claim these funds can be designated by the Sponsor. 	No
UCS Disability Pooled Trust 1575 50th Street 3rd Fl 3rooklyn, NY 11219 Prh: (718) 854-9300 Fax: (718) 506-9314 Tustdept@ucsbo.org http://www.ucstrustservices.org/index.html	 Trust A Self-settled trust Enroliment fee: \$250 Minimum deposit: \$1,000 Annual fee of 2.5% of principal for deposits of \$1,000 - \$30,000; no additional fee for amounts in excess of \$30,000 Annual renewal fee: \$200 Trust B Self-settled trust Enrollment fee: \$250 Minimum deposit: \$100 Monthly fee of 10% of required monthly deposit (minimum \$30/mo., maximum of \$200/mo.) Annual renewal fee: \$100 Monthly contributions can be made by ACH direct debt from bank account 	Yes

List of Pooled SNTs in New York State - New York Health Access

Westchester ARC Foundation	Community Trust I - third-party trust	No
121 Westmoreland Avenue	Community Trust II - self-settled trust	
White Piains, NY 10605 http://www.westchesterarc.org/	'	
Anne Sweazey		
(914) 428-8330, ext. 3336		
asweazev@westchesterarc.org		
Western New York Coalition Pooled Trusts	WNY Coalition Pooled Medicaid Payback Trust (Trust #1)	Yes - but only
Go to <u>www.wnypopledtrust.org</u> for downloads, and more	Self-settled trust	for Erie, Niagara,
information	Accepts income deposits	Cattaraugus,
	No minimum deposit	Chautauqua and
Contact:	 Initiation fee: \$100 	Allegany Countles
Rachel Schepart (716) 853-3087 ext. 227	 Monthly fee sliding scale based on amount deposited 	Fee Schedule
Trustees:	WNY Coalition Over 65 Pooled Trust (Trust #2)	Income Only
Bannia Tua & Laval Comilans for the Elderth Directed	Self-settled trust	1
People Inc. & Legal Services for the Elderly, Disabled or Disadvantaged of WNY, Key Bank (fiscal trustee)	Accepts Income deposits	-
of Disadvantaged of whit, key ballk (liscal trustee)	 Only for individuals aged 65 or older 	
Only available to Erie, Nlagara, Cattaraugus, Chautauqua	 No minimum deposit 	
and Allegany Countles	 Initiation fee: \$100 	
	 Monthly fee sliding scale based on amount deposited 	
	WNY Coalition Under 65 Pooled Trust (Trust #1) and Over 65	
	Pooled Trust (Trust #2)	
	Self-settled trust	1
	Accepts lump sums without a minimum deposit	
	 Initiation fee: 10% of Deposit not to exceed \$1,000 	
	 Annual commission: 	
	 \$10.50 per thousand on the first \$400,000 	
	 \$ 4.50 per thousand on the next \$600,000 	
	 \$ 3.50 on the balance in the pooled trust 	
	 Plus additional annual commission by bank trustee 	
	 Semi-annual accounting fee: \$6 	
	 Termination fee: 1% of all amounts paid out 	
	WNY Coalition Friends and Family Trust	
	Third-party trust	
	Only 25% of balance remainder at the death of the beneficiary is	
	retained by trustees. Remaining 75% can be directed to others.	
	 Initiation fee: 10% of Deposit not to exceed \$1,000 	
	 Annual commission: 	
	 \$10.50 per thousand on the first \$400,000 	
	 \$ 4.50 per thousand on the next \$600,000 	
	 \$ 3.50 on the balance in the pooled trust 	
	 Plus additional annual commission by bank trustee 	
	Semi-annual accounting fee: \$6	
	Termination fee: 1% of all amounts paid out	
YAI / National Institute for People with Disabilities		No
460 West 34th Street	Serves DD/MR/MI/ Phys Disabled, TBI,	
New York, NY 10001-2382	 Minimum deposit \$25,000 with some flexibility. 	
http://www.yai.org/		
(212) 563-7474	·	

This article was authored by the Evelyn Frank Legal Resources Program of New York Legal Assistance Group.



Attached files

- SNT Outline 2016 3-14-2016 FINAL.pdf (993 kb)
- SNTShort 2014 (Sept 2014).pdf (748 kb)
- 2016-6-7 Pooled Trust Unit Liaison and Contact information.pdf (131 kb)
- Pooled Income Trust Contribution Worksheet.xls (42 kb)
- Cover Letter to Medicaid with SNT.dotx (53 kb)
- Pooled Trust Readiness Checklist.pdf (158 kb)

Also read

- Overview Supplemental Needs Trusts
- E Step-by-step guide to enrolling in the possion of the state of the s I Step-by-step guide to enrolling in a pooled income trust for Medicald spend-down

201 (125) (125)

3 Medicald Disability Determinations - NYS Forms & Procedures (with updated forms July 2012)

I Spousal Impoverishment Protections for Married Couples where One Spouse is in a Managed Long Term Care Plan - Pooled Trusts Allowed as an Option

 Prev
 Next

 Advocate's Outline on Supplemental Needs Trusts
 How to use a pooled SNT to eliminate the Medicaid spend-down.

Fowered by KBPublisher (Knowledge base software)

This site provides general information only. This is not legal advice. You can only obtain legal advice from a lawyer. In addition, your use of this site does not create an attorney-client relationship. To contact a lawyer, visit <u>http://lawheigny.org</u>. We make every effort to keep these materials and links up-to-date and in accordance with New York City, New York state and federal law. However, we do not guarantee the accuracy of this information. To report a dead link or other website-related problem, please <u>e-mail us</u>.