Chapters 477 NAC 20 through 28 apply to the following: Aged, Blind, and Disabled (ABD); Medically Needy (MN); Medicaid Insurance for Workers with Disabilities (MIWD); Women’s Cancer Program; Transitional Medical Assistance (TMA); Former Foster Care; Emergency Medical Services Assistance (EMSA); Children and Young Adults Eligible for IV-E Assistance

CHAPTER 20-000 DEFINITIONS PERTAINING TO NON-MAGI PROGRAMS

**ABD**: A categorical program consisting of medical assistance only. Two (2) types of cases are included in the medical assistance only category:

1. **ABD with No Share of Cost (ABD only)**: A case in which an individual’s income is less than the applicable standard.

2. **ABD Share of Cost Case (ABD with Share of Cost)**: A case in which there is sufficient income to meet daily maintenance needs and a portion, but not all, of the unit’s medical needs. The case is opened for medical assistance with no payment for medical services made until the Share of Cost is obligated toward medical services.

**Aged**: A client who is sixty-five (65) years old or older.

**Annuity**: A prepaid investment that pays periodic (usually monthly) payments for a set period of time. Payments may begin immediately or at a future date.

**Annuity Transaction**: The purchase of an annuity, changing the annuity beneficiary, or authorizing the commencement of the pay-out period (annuitizing).

**Available Resources**: For the determination of eligibility, available resources include cash or other liquid assets or any type of real or personal property or interest in property that the client owns and may convert into cash to be used for support and maintenance.

**Blind**: A category of eligibility for clients who are sixty-four (64) years old and younger and who are blind in accordance with program standards.

**Burial Insurance**: Insurance policies in which the terms specifically provide that proceeds can be used only to pay the burial expenses of the insured.

**Cash Surrender Value**: Amount which the insurer will pay (usually to the owner) upon cancellation of the policy before death of the insured or before maturity of the policy.
Contributions/Cash Support: Verified payments that are paid to or for a Medicaid unit.

Disabled: A category of eligibility for clients who are sixty-four (64) years old and younger and who are disabled as determined by the Social Security Administration (SSA) or the State Review Team (SRT). An individual is disabled if s/he is unable to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment that can be expected to result in death or that has lasted or can be expected to last for a continuous period of not less than twelve (12) months. See Titles II and XVI of the federal Social Security Act, as amended, for further disability criteria.

Equity: The fair market value of property minus the total amount owed on it.

Essential Property: Property or equipment owned solely by the client/client’s spouse in his/her name, or held in a partnership or corporation interest.

Face Value: Basic death benefit of the policy exclusive of dividend additions or additional amounts payable because of accidental death or under other special provisions. In determining the face value of a policy, the original face value of the policy is used.

Fair Market Value: The price an item of a particular make, model, size, material, or condition will sell for on the open market in the geographic area involved.

Former Foster Care: A client less than twenty-six (26) years old who was in foster care under Nebraska or the tribe’s responsibility and receiving Medicaid when s/he became eighteen (18) or nineteen (19) years old, or such higher age at which federal foster care assistance ends.

Former Ward: An individual between the ages of eighteen (18) and twenty-one (21) who has been discharged as a ward by the Department and who is in a continuing educational program.

Grantor of a Trust: Any individual who creates a trust. This includes:

1. An applicant/client;
2. His/her spouse;
3. A person, including a court or administrative body, with legal authority to act in place of, or on behalf of, the applicant/client or his/her spouse (guardian/conservator); or
4. A person, including a court or administrative body, acting at the direction or on the request of the applicant/client or his/her spouse.

Home: Any shelter which the individual owns and uses as his/her principal place of residence. The home includes any land on which the house is located and any related outbuildings necessary to the operation of the home.

Household Size: The total number of individuals living together on the basis of relative responsibility.

Income: Gain or recurrent benefit received in money or in-kind from employment, business, property, investments, gifts, benefits, annuities, or trusts at regular or irregular intervals of time.
In-Kind Income: The value of food, clothing, shelter, or other items received in lieu of wages.

Irrevocable Trust: A trust that cannot in any way be revoked by the grantor of the trust.

Medicaid-Qualifying Trust: An irrevocable trust or similar legal device that was established before August 11, 1993, by an applicant/client or his/her spouse under which

1. The applicant/client is the beneficiary of all or part of the payments from the trust; and
2. The amount of the distribution is determined by one or more trustees who are permitted to exercise any discretion with respect to the amount to be distributed to the individual and the distributable amount from a Medicaid-qualifying trust has no use limitation.

Medically Needy: A program that extends Medicaid coverage to eligible individuals with high medical expenses whose income exceeds the maximum threshold, but who would otherwise be eligible.

Pooled Trust: An irrevocable trust containing the assets of a disabled individual(s) that is established and managed by a nonprofit association in a separate account solely for the benefit of a disabled individual.

Qualified Long-Term Care (LTC) Partnership Policy: A Qualified LTC Partnership policy is a long-term care insurance policy that has been approved by the Nebraska Department of Insurance. The Department of Health and Human Services accepts the Department of Insurance’s certification of the policy. If an individual has a long term care insurance policy that does not meet the requirements for a Qualified LTC Partnership policy because it was issued before July 1, 2006, the individual may exchange the policy for another.

Real Property: Land, houses, or buildings.

Revocable Trust: A trust that can be revoked by the grantor. Any trust stipulating that it may be modified or terminated only by a court is considered to be a revocable trust, as the grantor (or representative) can petition the court to terminate the trust. A trust designated as irrevocable but that will terminate if certain action is taken by the grantor is considered a revocable trust for purposes of these regulations.

Share of Cost: A client’s financial out-of-pocket obligation for medical services when countable income exceeds the applicable income level. The Share of Cost amount is the difference between the unit’s countable income and the appropriate income threshold. This amount must be obligated or paid to medical providers before Medicaid will pay on the remaining medical bills.

Special Needs Trust: An irrevocable trust containing the assets of the client and established solely for the benefit of the client by the client’s parent, grandparent, legal guardian, or a court, if the state will receive all amounts remaining in the trust upon the death of the client or on termination of the trust up to the amount of total Medicaid paid on behalf of the client.
SSI Federal Benefit Rate: The maximum Supplemental Security Income (SSI) benefit payable based on an individual's living arrangement (e.g., own home, nursing home, living in another's home).

Standard of Need for Non-MAGI Programs: The consolidation of items necessary for basic subsistence with amounts based on unit size. Included in this standard are shelter and utilities.

Testamentary Trust: A trust established through a will.

Trust: For purposes of these regulations, a trust is any arrangement in which an individual (grantor) transfers property to another person(s) (trustee[s]) with the intention that it be held, managed, or administered by the trustee(s) for the benefit of the grantor or certain designated beneficiaries. The trust must be valid under state law and manifested by a valid trust instrument of agreement. A trustee holds a fiduciary responsibility to manage the trust's corpus and income for the benefit of the beneficiaries.

The term “trust” also includes any legal instrument or device that is similar to a trust for purposes of these regulations. It involves a grantor who transfers property to an individual or entity with the intention that it be held, managed, or administered by the individual or entity for the benefit of the grantor or others. This can include (but is not limited to) escrow accounts, investment accounts, pension funds, irrevocable burial trusts, annuities, and other similar entities managed by an individual or entity with fiduciary obligations.

Trust Beneficiary: Any individual, or individuals, designated in a trust to receive any disbursal from the corpus of the trust, or from income generated by the trust, which benefits the party receiving it. A payment from a trust may include actual cash, as well as non-cash or property disbursements, such as the right to use and occupy real property.

Unit: The number of individuals in a household.

Women’s Cancer Program: Health care coverage for eligible woman who need treatment for breast and cervical cancer. This program was established by the Breast and Cervical Cancer Prevention and Treatment Act of 2000.