

## GOVERNMENT OF THE DISTRICT OF COLUMBIA

**SAMPLE NOTICE: Non-MAGI Spend Down Notice**

Notice Date: 06/01/2023

Account ID: 999999999

JOHN DOE  
441 4<sup>TH</sup> STREET, NW  
WASHINGTON, DC 20001

**Subject: Ineligible Decision For Medical Assistance Coverage**

Dear JOHN DOE:

**Medicaid Decision**

- The individual listed below has been determined **not eligible** for Medicaid because the individual's **income** is over the Medicaid Income Standards.

Individual(s)	Household Size	Countable Household Income	Medicaid Household Income Standard
John Doe	1	\$3500	\$1215

This decision is supported by 29 DCMR § 9511 and TITLE 42, CODE OF FEDERAL REGULATIONS, SECTION 435.831.

*If you disagree with our decision, you have a right to ask for a Fair Hearing. Please see the section below called, "If You Think We Made a Mistake," and the insert referenced in that section for an explanation of your rights and how to request a Fair Hearing.*

**Spend Down**

John Doe was/were determined **not eligible** for Medicaid due to excess income.

However, the individual(s) listed above met the other eligibility criteria for Medicaid based on Aged, Blind, and Disabled (ABD) and may still become eligible for Medicaid through "Spend Down." "Spend Down" Medicaid is for people who have income over the Medicaid limit, but are responsible for high medical bills.

**Questions?** Call District Direct Customer Service at 1-202-727-5355 or go online to [www.districtdirect.dc.gov](http://www.districtdirect.dc.gov). **[If Assister/Broker Assigned]** You may also contact <assister/broker organization name> at <assister/broker organization phone>.

If the above individual has paid or unpaid medical expenses, they may be eligible for Medicaid through Spend Down. Any unpaid bills in excess of the Spend Down amount may be carried over to determine eligibility through Spend Down for the next month.

<b>Spend Down Amount</b>
To qualify for Medicaid through Spend Down, you must provide proof of paid or unpaid medical expenses that meet or exceed \$2,699.42 each month.

<b>Spend Down Amount Calculation</b>
<b><u>Total Unearned Income: \$ 3500</u></b>
<b><u>-\$20 Deduction</u></b>
<b><u>= \$ Net Unearned Income \$3480</u></b>
<b><u>Total Earned Income: \$ \$3480.</u></b>
<b><u>- Medically Needy Income Limit: \$ 780.58</u></b>
<b><u>= \$ Spend down Amount \$2699.42</u></b>

If your total allowable bills are equal to or more than your Spend Down amount within your budget period below, you may qualify for Medicaid coverage for that period. Your Spend Down budget period is from July 1, 2023, to December 31, 2023. Your Spend Down amount for the budget period is \$16,196.52.

You can use current and old medical bills to meet Spend Down based on these rules:

- You can use current paid or unpaid medical expenses to bring down your excess income.
- You can only use outstanding medical expenses that are the responsibility of the individual or family or financially responsible relatives.
- You cannot use expenses that are covered by other insurance or Medicare, or that have not been charged to you by your medical provider.
- You can use old medical bills that you still owed money for after APRIL 1, 2023.
- You can use any bills for any medical services that you received after APRIL 1, 2023.
- You can use Medicare or other health insurance premiums, deductibles, or coinsurance charges.
- You can only use expenses that are for necessary medical and remedial services.
- You cannot reuse any expenses that you used to qualify for Medicaid through Spend Down in the past.

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These are some types of medical expenses that you can use:

- Routine, preventive, and emergency medical treatment and services including;
  - Physician services,
  - Inpatient and outpatient medical services,
  - Nursing Home services
  - Medical or personal care in your home
  - Clinic Services
  - Prescription and medically necessary over the counter drugs,
  - Medical equipment and devices prescribed by a physician,
  - Ambulance services,
  - Other medical expenses usually covered by Medicaid,
  - Other medical expenses not usually covered by Medicaid but medically necessary,
  - Transportation to and from medical visits,
  - Health insurance premiums, including Medicare premiums
  - Co-payments and deductibles on medical expenses
  - Eyeglasses;
  - Speech, occupational and physical therapy.
  - Dental services, and
  - Chiropractic services.

### How to Submit Medical Expenses for Spend Down

You can submit medical and remedial expenses to the Spend Down Unit at the Department of Human Services to receive a determination of whether the person may qualify for Spend Down. Please refer to the attached information sheet.

If you become eligible for Medicaid through Spend Down, you will still be financially responsible for the expenses you used to meet your Spend Down amount. For more information about how to qualify for Medicaid through Spend Down, you can call the Spend Down Unit at (202) 698-4202.

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### If You Think We Made a Mistake

If you disagree with any eligibility determination(s) provided in this notice, you have the right to appeal the determination decision(s). You may request an appeal by phone, in person, online, and by mail. You must request an appeal **by 09/30/2023** 42 C.F.R. §431.221(d), D.C. Official Code §4-210.09. **See the insert for more information on your appeal rights.**

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SAMPLE

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