D.C. Medicaid: Home Care and Nursing Home Services

Both Medicare and D.C. Medicaid pay for home care services. They also pay for nursing home stays. However, only D.C. Medicaid pays for these services for the long-term. Here are the answers to questions that customers often ask:

Are Medicare and D.C. Medicaid different?
Yes. Medicare is a federal program for seniors and some disabled people. Most people on Medicare also get Social Security benefits. Medicare has no income limit.

D.C. Medicaid pays the medical bills of certain people who have low incomes. It also pays for the medical bills of people with high medical costs.

Customers can get both Medicare and D.C. Medicaid. Customers may need both if they need lots of care.

If I want to live at home, can I get services there?
D.C. Medicaid pays for many home care services. These include home nursing and adult day care. D.C. Medicaid also pays for personal care aides, who help with bathing and cooking.

Customers can use these services instead of going to a nursing home. To learn more about home care services, please call (202) 442-5912 or (202) 442-9055.

When does D.C. Medicaid pay for home care or nursing home services?
To get D.C. Medicaid for home care or nursing home services, customers must meet a “level of care.” This means that a customer needs a lot of help with his or her daily activities.

Will Medicaid cover everything?
No, not always. Even with D.C. Medicaid, customers sometimes pay part of the cost of a nursing home. The amount that they pay is based on their income.

What will happen to my spouse if I go into a nursing home?
D.C. Medicaid uses special rules to make sure a spouse has enough income and assets to live at home. Spouses can keep their homes and cars.
How do I apply for D.C. Medicaid?

Customers should apply as soon as they know that they need services. To receive a Medicaid application, please call (202) 724-5506.

If a customer is already in a hospital or nursing home, the staff there can help him or her apply. A friend or relative can also help a customer apply.

To apply, customers need to complete and sign an application form. When applying, they also need:

- **Proof of income**
  (for example, paystubs or proof of retirement income, disability income, or Worker’s Compensation)

- **Proof of your assets**
  (for example, banking and checking account statements)

- **Proof that you live in D.C.**
  (for example, utility or telephone bill, lease, rent receipt, or DC driver’s license)

- **Proof of your Social Security number**
  (for example, Social Security card or other documents with your Social Security number on it)

- **Medicare card**, if you have one

We will need this proof before making a decision.

In most cases, we will tell customers if they are eligible within 45 days. If customers are disabled, we will tell them if they are eligible within 90 days. The sooner they provide all of their information, the faster we can make a decision.

How do I make sure that I continue to get Medicaid?

Once a year, we contact customers to see if their situations have changed. This is called recertification. Customers can ask their social worker or nursing home to help them recertify.

Who should I call with questions about Medicaid?

To learn more about D.C. Medicaid, call (202) 724-5506. We can also help you with Food Stamps and cash assistance.

For questions regarding home care services, please call (202) 442-5912 or (202) 442-9055.

What if I already have Medicare?

Some customers can get both D.C. Medicaid and Medicare. In fact, D.C. Medicaid may pay a customer’s Medicare monthly premiums. Please call (202) 724-5506 to find out more.