To help you plan ahead for your long term care needs, the State of Connecticut has joined forces with private insurance companies to form the Connecticut Partnership for Long Term Care. Working together, this public/private partnership has created an innovative program that offers:

Quality, affordable long term care insurance—a way to get the care you need, without depleting all of your savings and while protecting your assets.

**What are the chances I’ll need Long Term Care?**

More than half of all Americans who turn 65 years old will eventually need some assistance with daily living activities, either in a nursing home or in their own homes. A Partnership-approved Long Term Care insurance policy can help you plan for this possibility.

**Won’t my health insurance cover these costs?**

Typically, Medicare and other medical plans only cover Doctors’ fees and hospital stays—not ongoing or personal care. Medicaid will cover long-term care costs, but only after you have spent down most of your assets. Long Term care insurance from the Partnership is a safety net against this possibility.

**How does the Partnership work?**

If you buy long-term care insurance approved by the Connecticut Partnership, you can apply to Connecticut’s Medicaid program to cover costs that could arise after your insurance policy ends, without having to drain all your savings first. That’s because this program pairs private insurance with special Medicaid eligibility requirements to give you more control over your financial future.

For example, you may buy a policy that will eventually pay for $150,000 in long-term care costs. If your long term care exceeds $150,000, you can then apply for Medicaid assistance. Because you had a Partnership policy, Connecticut’s Medicaid program would allow you to keep a portion of your assets equal to the amount your policy paid in services. In this example, you would be able to keep $150,000 of your assets.

The Connecticut Partnership for Long Term Care is a joint public-private program which encourages individuals to plan for their long term care needs by purchasing insurance protection in the amount of assets he or she wishes to protect. If and when an individual exhausts insurance benefits, he or she can apply for Medicaid in Connecticut or an approved reciprocal state and each dollar that the insurance policy has paid in benefits will be subtracted from the assets the individual still has so that those assets would not be recognized or considered in determining the individual’s eligibility for Medicaid in Connecticut or a reciprocal state.