

## **(INSERT STATE MEDICAID OFFICE NAME) LETTER**

To:

Date:

Re: Trust Beneficiary

Claim Number: SSN

To Whom It May Concern:

This letter is to notify the (INSERT STATE MEDICAID OFFICE NAME) that Trust Beneficiary has received a settlement in the amount of \$FUND. Funds were irrevocably transferred or assigned into a trust authorized under federal law at 1917(d)(4)(C) of the Social Security Act (the Act) (42 U.S.C. 1396p(d)(4)(C)) commonly called a Pooled Special Needs Trust.

The assets of a Pooled Special Needs Trust are unavailable according to the Federal Omnibus Budget Reconciliation Act of 1993, since the trust is irrevocable and trust distributions cannot be made directly to Trust Beneficiary, but only to a third party to provide for Trust Beneficiary's special and supplemental needs. As a result of this transfer into the Pooled Special Needs Trust, the funds contributed will not count as income or as a resource for purposes of determining Medicaid eligibility.

The Pooled Special Needs Trust is an exempt asset for purposes of calculating eligibility for needs-based public benefits, like SSI and Medicaid. To meet the legal requirements of a Pooled Special Needs Trust, the Trust must meet the following conditions:

1. The trust contains the assets of the individual who is disabled
2. The trust is established and managed by a nonprofit association;
3. A separate account is maintained for each beneficiary of the trust, but, for purposes of investment and management of funds, the trust pools these accounts;
4. Accounts in the trust are established solely for the benefit of individuals who are disabled by the disabled individual, his or her parent, grandparent, or legal guardian, or by a court; and
5. The State receives, upon the death of the disabled individual, all funds remaining in the individual's account, up to an amount equal to the total amount of medical assistance paid on behalf of the disabled individual by the Medicaid program. The State shall receive this amount only to the extent that funds remain in that individual's account and are not retained by the trust to cover management and investment fees associated with the account.

Trust Beneficiary has transferred the above-mentioned funds into the STATE CPT First-Party Pooled Trust program. A copy of the Enrollment Documents and Master Trust are attached. This Trust meets all of the requirements of a Pooled Special Needs Trust. CPT is a not for profit association (501(c)(3) organization which established and manages the trust. A separate account is maintained for each beneficiary inside the trust. The account is established solely for the benefit of Trust Beneficiary. The appropriate payback provisions are provided in the Trust.

If there are additional questions that need to be answered concerning the STATE CPT First-Party Pooled Trust program call 877-695-6444.

Sincerely,

Trust Beneficiary