

Filing an Application for the Arizona Long Term Care System (ALTCS)

What is ALTCS?

ALTCS is the State of Arizona's Medicaid program that provides long term care services, at little or no cost, to financially and medically eligible Arizona residents who are aged, blind, disabled, or have a developmental disability.

This information sheet provides general information about the ALTCS application process and includes basic program requirements about residency, age, disability, and citizenship status, as well as general guidelines for financial eligibility which includes resources and income. You must also meet medical eligibility requirements. This is a guide only. Additional information sheets about Community Spouse rules (that apply when you are legally married), trusts and transfers are available upon request. **For more specific questions, contact ALTCS toll-free at (888) 621-6880.**

How do I apply for ALTCS?

- To apply, you must complete an application.
- To start an application you may use the ALTCS online portal in [Health-e-Arizona Plus](#), or call ALTCS toll-free at (888) 621-6880.
- Another person can act on your behalf during the application process.
- You will need to provide documents to show that you meet financial and non-financial eligibility requirements.
- You must be determined as needing a nursing home level of care.

What are the Non-Financial Eligibility Requirements?

To be eligible for ALTCS, you must:

- Be determined in need of a nursing home level of care as determined by AHCCCS;
- Be a citizen or qualified immigrant;
- Have a Social Security Number (SSN) or apply for one;
- Be an Arizona resident;
- Live in an approved living arrangement, such as your own home, or an AHCCCS certified nursing facility or assisted living facility.

How are Resources Treated?

For single applicants, countable resources cannot be more than \$2,000. If you are legally married, you may be able to set aside some of your resources for the needs of your spouse, so long as your spouse is not living in a medical facility. If you are married, please ask for a Community Spouse Information Sheet.

Countable Resources	Resources That We Do Not Count
• Checking, savings, and credit union accounts • Real property that you do not live in • Cash value of some life insurance policies • Cash, stocks, bonds, certificates of deposits • Non-exempt vehicles	• Your home that you live in, unless it is held in a trust • One vehicle • Burial plots and irrevocable burial plans • \$1500 designated for burial • Household and personal belongings • Certain financial accounts that are excluded by federal law. Examples include qualified ABLE accounts, Flexible Spending Arrangements (FSA), and 530 Coverdell Education Savings Accounts.

If your resources are over \$2,000, and you are under the age of 65, you may still be able to qualify by setting up a special type of trust. Please ask for the Special Treatment Trust Information Sheet.

How is my Income Treated?

Income that we count includes, but is not limited to, wages, Social Security, Supplemental Security Income and disability or retirement pensions.

The ALTCS gross monthly income limit is \$2,982 (effective January 1, 2026) for an individual. If you are married, ask for a Community Spouse Information Sheet. If your income is over the limit, you may still be able to qualify by setting up a special type of trust. If you are over income, ask for a Special Treatment Trust Information Sheet.

Will I Have to Pay Any of My Income Toward the Cost of My Care?

Once you have been determined eligible for ALTCS, a calculation will be made to determine if, or how much, you will need to pay towards the cost of your nursing home or home and community-based services. This amount is called the Share of Cost. Your monthly gross income will be totaled and then the following deductions may be allowed:

- A personal needs allowance;
- A Community Spouse allowance for the needs of your spouse still living in the home;
- A family allowance for any dependents living in your home;
- A home maintenance allowance if you are in a nursing home but will go home within 6 months;
- Your medical insurance premiums; and
- Medical expenses that ALTCS does not pay for like hearing aids, eyeglasses, and dental care.

How does ALTCS Determine if I am Medically Eligible?

Once you have been determined financially eligible, a medical assessor will conduct an interview with you and any caregivers you may have, and review medical records, to determine if you meet the medical requirements. To meet medical requirements, you must be at immediate risk of institutionalization in a nursing facility or intermediate care facility for individuals with intellectual disabilities (you must require that level of care, but you do not need to reside in a facility).

What are the Different Types of ALTCS Services?

Once you have been determined eligible for ALTCS services, you will be enrolled with a Long Term Care health plan and assigned to a case manager. The case manager will meet with you and your family to develop a service plan. Covered services may include the following:

- Institutional Care in a Nursing Facility;
- Home and Community Based Services, combining out-patient and in-home care;
- Medical Services, such as Doctor's office visits and prescriptions (prescription coverage is limited for people with Medicare);
- Behavioral health services;
- Preventive and well care for children; and
- Hospice services.

If you have additional questions, contact your Benefits and Eligibility Specialist, or contact ALTCS toll-free at (888) 621-6880. Additional contact information for ALTCS can be found by going online to:

<https://www.azahcccs.gov/members/ALTCSlocations.html>

For more information, go to the following site on the Internet:

<https://epm.azahcccs.gov/EligibilityPolicyManual>