

Subsidy Program: FREQUENTLY ASKED QUESTIONS

Eligibility: Support is available to Oregon Masons, their wife or widow, and female members of the Oregon Order of the Eastern Star, with 5+ years in good standing. Support is also available for their dependent children through age 21.



What does the MasonicAid Subsidy program provide? What expenses are covered?

Once personal assets are spent down, the program provides a monthly financial subsidy to eligible clients with healthcare needs who wish to live in an approved care community.

MasonicAid can cover the expenses below to the extent that they are determined to be appropriate, necessary, and sufficient, and are not covered by available insurance or other resources, such as Social Security, Medicare, pensions, insurance, or government benefits. Covered expenses could include the following and must be preauthorized:

- Rent & Care Services In accordance with MasonicAid guidelines
- Medical Charges Hospital, ER, doctor & ancillary charges not covered by insurance
- Pharmacy Bills Limited to prescription drug charges & medically necessary OTC medications
- Medical Supplies Limited to medically necessary items as defined by MasonicAid guidelines

How is eligibility for assistance determined?

Those who meet MasonicAid eligibility criteria and are over 65 may apply for subsidized care and will be evaluated on a case-by-case basis. A caseworker conducts a financial review of the past three years to assess assets, debts, income, and expenses. Additionally, a facility assessment is performed to evaluate services and identify any support needed with daily living activities.

Who is not eligible for financial assistance through the MasonicAid Subsidy program?

- Any members with less than five years of Oregon membership
- Remarried widows (current husband is not a Mason)
- Those without healthcare need(s)
- Applicants under the age of 65

However, information and referrals are available to all callers. The only exception that will be considered is, if all other eligibility requirements are met, applicants under the age of 65 who have been deemed fully disabled by the federal government and are currently receiving federal benefits may apply.

Please note: If a MasonicAid client becomes eligible for Medicaid, where on-going financial support is no longer required, then participation in monthly financial assistance would end but applications for one-time assistance may still be accepted.

Do I need to apply for Medicaid and other government benefits first?

Yes. If you're eligible for Oregon Medicaid or VA benefits, utilizing these resources can reduce the financial assistance required from the MasonicAid program. This approach helps MasonicAid to be a good steward of its resources, allowing the program to assist more Masonic families.

I know about the Masonic & Eastern Star Home, The Jennings McCall Center, in Forest Grove. Am I required to live there, or can I choose other care communities? Even out of state?

In addition to The Jennings McCall Center, care communities that meet the guidelines and standards in Oregon, Washington, California, Idaho, and Nevada are available options to our members.

How long can I stay at an approved care community?

While your Financial Agreement may not guarantee lifetime care, MasonicAid will make every effort to provide financial assistance for ongoing care, as resources allow. To remain in the program, you'll need to comply with the terms of both your Facility Agreement and the Financial Agreement.

If your current care facility is unable to meet your health needs, you may need to transition to a specialized care facility, such as skilled nursing. We will request that you apply for Medicaid and, if you qualify, ongoing financial assistance from us may end, but you may still be eligible for one-time assistance through MasonicAid. A case manager will support you throughout this transition, helping you find an appropriate placement and assisting with the necessary steps.

What will happen to my monthly income, such as Social Security or Pension?

Your monthly income will continue to be deposited into your bank account. However, this income will be used to cover the cost of your care and any other program-related expenses. Assistance from MasonicAid will help cover your remaining needs.

Can I keep my health insurance?

Yes, you may keep your current health insurance if it is cost-effective. You may also be required to participate in any recommended group health plans or health maintenance organizations if they offer financial benefits. If your insurance premiums are automatically deducted, your funds will remain available to cover those premiums, ensuring a smooth transition for you.

Am I given any personal spending money?

Yes, you will receive \$150 per month for personal expenses, with an additional \$300 provided in December. This allowance can be used for personal items, cell phone expenses, pet care, gifts, and other incidental expenses.

Can I incur debt once on the program?

Upon enrollment in the MasonicAid Subsidy program, all existing debts must be settled, and no new debts may be incurred. Accumulating additional debt may jeopardize your eligibility for the program.

Can I keep my car?

No. Since a vehicle is considered an asset, you must sell any vehicle(s) and apply the proceeds toward the cost of your care.

Am I allowed to have a pet?

If the care community allows pets, you may have pets as long as you meet campus requirements. All pet-related expenses must come from your monthly spending allowance. The MasonicAid Subsidy Program will not cover costs for pet care, such as veterinary bills, licensing, or damages.

I have some healthcare needs but am not ready for Assisted Living just yet. What services are available? MasonicAid can connect members with resources, including in-home care to assist with health needs, cleaning services, etc. Caseworkers are available to provide guidance and support.

I'm married. What if my healthcare needs differ from my spouse's?

If you and your spouse are applying to the MasonicAid Subsidy program, a case manager will conduct a comprehensive assessment to address your unique needs. This assessment helps ensure that both of you receive appropriate placement or services, even if your care needs differ.

What happens to my life insurance?

Life insurance policies with cash value are considered assets. Unless designated for funeral expenses, these policies must be surrendered and used to cover your care.

What about my funeral/burial expenses?

If you are approved for the MasonicAid Subsidy program and do not have pre-paid funeral arrangements, MasonicAid will cover a basic package, including services and burial or cremation, with interment at Forest View Cemetery, arranged by Fuiten, Rose & Hoyt Funeral Home. Family members are welcome to arrange and fund alternative services, if desired.

How do I make a referral to MasonicAid?

Call the MasonicAid Assistance line at (888) 811-3199 or fill out a form online at www.MasonicAid.com.

When calling to make a referral for someone other than yourself, it is important to have their permission. Ideally, the person needing assistance will make the call, or be with you when you call. This allows the person needing assistance to be involved with the process from the start.

Will Masonic leadership or Board members know I'm receiving assistance?

No. Confidentiality is strictly maintained, and any information shared with the Board is anonymous. When your request is reviewed, you are identified only by a case number and age, protecting your privacy and ensuring fair, unbiased decisions.

It should be noted that the above responses are subject to change at the discretion of the Masonic & Eastern Star Home Board. An evaluation and assessment by a representative of the facility, to determine levels of care, will be required prior to approval.

If you already reside at a care community, we will work with their representative.

For more information, visit <u>www.MasonicAid.com</u>.

Wherever you are, we care.