

**Testimony in favor of HB 1485**  
**Personal Needs Allowance for Medicaid Recipients**  
**Senate Human Services Committee**  
**March 12, 2025**

Chair Lee and members of the Senate Human Services Committee, thank you for your consideration of HB 1485. My name is Retha Mattern, and I am here to share my family's personal experience in relation to long term care and Medicaid, and why I support the increase in personal needs allowance with an inflationary adjustment proposal in this bill.

Last fall, my mother and father-in-law lived comfortably and independently in their home in Minot. They purchased this home following the devastating flood in 2011, when their home of nearly four decades was destroyed. At that time, no one in our immediate family had ever thought we would be looking into the rules and regulations regarding Medicaid, and certainly never imagined that I would be here to advocate for an increase in its allowance.

My in-laws had done everything right in their lives. They both worked, he as a banker and she as a teacher. They saved money, had retirement income, and my father-in-law also receives a small monthly disability payment from his time in the North Dakota National Guard. He has a life insurance policy, and they had also taken out a long term care insurance policy. Together they raised one child, my husband Mark, and they doted on their grandchildren, our daughter Clara and son Finn. They were not wealthy, but lived comfortably within their means.

Everything changed after my father-in-law Dale suffered a heart attack in September. He survived but began to suffer a series of complications that would eventually result in three more hospital admissions and six surgeries before Christmas, initially at Trinity Hospital in Minot and then at Sanford in Bismarck. Days before his first surgery, he found his wife of 57 years, Kay, unresponsive in bed. She was life flighted to Sanford Hospital in Bismarck where she ultimately passed after spending 33 days receiving incredible care from the doctors, nurses, therapists, and others there.

For the last few weeks of her life, Dale and Kay were in the hospital together. The amazing staff and providers at Sanford went above and beyond to admit them onto the same floor. When her escalating medical needs required a step up in care, moving floors, they moved him as well. When they were both stable and awake at the same time, nurses would take one to visit the other, even on the night shift.

Dale was by her side holding her hand when she passed, along with Mark and me. His own medical condition, coupled with increasing dementia and inability to perform daily activities to care for himself, resulted in him requiring long-term skilled nursing care once he was able to be discharged – which was the day after her funeral. He is now residing at Missouri Slope, at the Washington campus, where we visit him frequently.

His initial admission was covered by Medicare, but that ended about six weeks ago. Now, we are having to spend all his assets to pay for his care. At more than \$530 a day, over 3x the amount covered by his long-term care insurance policy, his life savings and all of their other assets will be depleted in just a few months, at which point we will need to apply for coverage under Medicaid.

As we began researching the requirements for Medicaid, we learned that he would only be able to retain \$100 a month of his own income stream to pay for any incidentals or extras he may need. While all his immediate needs like medication and food are covered, things like replacing a worn-out pair of sweatpants or buying a new pair of shoes are not. With frequent washing in industrial facilities, clothing can wear out quickly. Instead, any of these extras, including things like a subscription to the newspaper or buying a new blanket, that would exceed \$100 a month total would likely fall to a family member to pay for. There is also a total asset limit, meaning someone can't necessarily just do without for one month and carry it over to the next.

There is no dignity for an older adult, a veteran, and a retired worker in having to rely on their child for any extra comforts. \$100 a month does not go very far. And, as inflation increases yearly, it will cover even less in the years ahead. By including an inflationary factor with the small increase in this bill, you are working to ensure that our elderly can retain a small amount of dignity at a time they are already so reliant on so many others for their daily needs.

Thank you for your consideration, and I would be happy to answer any questions.