# Checklist for Post-Death Lien Negotiations

## New Proposed Values
- **Offer Amount**: $____________________
- **Fair Market Value**: $__________________

## New Medicaid Amount Owed:

## Original Billing Values
- **Medicaid’s Amt. Owed**: $___________________
- **Tax Appraised Value**: $____________________

## Factors Considered:
- **(01)** Property selling: Yes____ No____
- **(02)** Family wants to satisfy lien: Yes_____ No____
- **(03)** Property has or will be sold at tax sale? Yes_____ No____
- **(04)** Property nearing foreclosure? Yes____ No____
- **(05)** Age of Lien: ________________
- **(06)** Promissory Note to Pay Lien? Yes_____ No____
- **(07)** Reappraised by County? Yes_____ No____ Reason: ________________________________
- **(08)** Reappraised by Licensed Appraiser? Yes____ No____ Reason: ________________________________
- **(09)** Listed for sale by Realtor? Yes____ No____
- **(10)** How long on Market? ________________
- **(11)** How many offers? ____ Reason: 

## Repairs Needed
- Contractor supplied estimates of repairs? Yes_____ No____

## Financing or (15) Cash Sale?
- If Financing, is this a (16) FHA or VA Loan?  ________________

## Are there any Health/Safety Hazards?
- Yes _____ No____ Describe: ________________________________

## Are there any title issues?
- Yes____ No_____ Details: ________________________________

## Are there family members or others living on property?
- Yes_____ No____

## Realtor’s Opinion as to Why this is Valid Offer

## Realtor/Appraiser provided comps, pictures?
- Yes____ No____

## Other Considerations:
- ____________________________________________________________________________

## Final Amount for Approval:
- **New Medicaid Amount Owed**: $____________________

## Amount Reduced from
- **Final Amount for Approval**: $____________________
- **% Reduction**: _____% 

## Approved by:
- ________________________________

## Denied by:
- ________________________________

## Reason for Denial:
- ____________________________________________________________________________

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