

MISSISSIPPI DIVISION OF MEDICAID

Eligibility Policy and Procedures Manual

300.02 RESOURCE LIMITS

Federal law establishes a limit on the value of resources an individual or couple may own and still be eligible for Medicaid. Countable resources must not exceed the limit in effect for the applicable time period as indicated below:

EFFECTIVE	INDIVIDUAL	COUPLE
Prior to 01-01-1985	\$1,500	\$2,250
01-01-1985	\$1,600	\$2,400
01-01-1986	\$1,700	\$2,550
01-01-1987	\$1,800	\$2,700
01-01-1988	\$1,900	\$2,850
01-01-1989	\$2,000	\$3,000
07-01-1999	\$3,000	\$4,000
07-01-2000 ongoing	\$4,000	\$6,000

SSI and Liberalized Limits

The individual/couple limits for groups subject to SSI resource limits remain \$2,000/\$3,000. The increased limits above are applicable to most coverage groups subject to liberalized resource policies.

300.02.01 COVERAGE GROUPS SUBJECT TO SSI RESOURCE LIMITS

SSI resource limits apply to the following coverage groups:

- SSI Retro Determinations
 - Unless the client must be placed in a liberalized coverage group for the retroactive period
- Former SSI Recipient Coverage Groups
 - Disabled Adult Child (DAC), Cost of Living (COL) and OBRA widows/ widowers
- Disabled Child Living at Home (DCLH)
- Qualified Working Disabled Individuals (QWDI)
 - This reduced coverage group has resource limits that are twice the SSI limits

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300.02.02 COVERAGE GROUPS SUBJECT TO LIBERALIZED RESOURCE LIMITS

Liberalized resource limits apply to the following coverage groups:

- Long Term Care coverage groups (LTC)
- Home and Community Based Waiver groups (HCBS)
- Poverty Level Aged and Disabled (PLAD)
 - Program ended December 31, 2005.
- Healthier Mississippi Waiver (HM)
- Working Disabled (WD)
- Medicare Savings Programs (MSP) - See discussion on these reduced coverage groups below.

300.02.03 REDUCED COVERAGE GROUPS

The reduced coverage groups for non-institutional individuals have or had a resource limit that is twice the SSI-related resource limit. However, under liberalized policy, the Medicare Savings Programs (QMB, SLMB, and QI) have no assets test. The limit for QWDI remains \$4,000/\$6,000.

COVERAGE GROUP	EFFECTIVE	INDIVIDUAL	COUPLE	MEDICAID PAYS
QMB Qualified Medicare Beneficiaries	07-01-1999	No Resource Limit	No Resource Limit	Medicare Cost Sharing Expenses
SLMB Specified Low-income Medicare Beneficiaries	07-01-1999	No Resource Limit	No Resource Limit	Medicare Part B Premium
QI Qualified Individuals	07-01-1999	No Resource Limit	No Resource Limit	Medicare Part B Premium
QWDI Qualified Working Disabled Individuals	07-01-1990	\$4,000	\$6,000	Medicare Part A Premium

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300.02.04 **RESOURCE LIMITS APPLICABLE TO INSTITUTIONAL GROUPS**

For Medicaid coverage groups considered to be “institutional” coverage groups, the following set of resource limits apply:

- Effective 10-01-1989, Spousal Impoverishment resource rules (discussed in detail in the Institutional section) apply to married couples whereby one spouse is in a medical facility while the other spouse remains at home. The Community Spouse is allowed a higher resource limit set by federal law and subject to increase each year.
- Effective 04-01-1993 until the coverage group ended 04-30-2005, Spousal Impoverishment rules applied to the Hospice Coverage group.
- Effective 01-01-1994, Spousal Impoverishment resource rules began to be applied to the HCBS Waiver programs.