

Post-Eligibility Treatment of Income Deductions by Institutionalized Individuals

1. Eyeglasses, not otherwise covered by the Medicaid State Plan, not to exceed a total of \$362.79 per occurrence for lenses, frames and dispensing fee.
2. Dentures – a one-time expense not to exceed \$678.44 per plate or \$1,356.88 for one full pair of new dentures.
3. Denture repair – not to exceed \$270.00 per occurrence.
4. Hearing aids – a one-time expense not to exceed \$1,777.40 for one or \$3,377.40 for both.