# Medicaid State Plan Eligibility

Income/Resource Methodologies

Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

#### **Package Header**

Package ID MS2019MS0006O

**SPA ID** MS-19-0018

Submission Type Official

Initial Submission Date 9/20/2019

Approval Date 10/18/2019

Effective Date 7/1/2019

Superseded SPA ID MS-18-0003

System-Derived

# A. Eligibility Determinations of Individuals Who Are Age 65 or Older or Who Have Blindness or a Disability

Eligibility determinations of individuals who are age 65 or older or who have blindness or a disability are based on one of the following:

1. SSA Eligibility Determination State (1634 State)

The state has an agreement under section 1634 of the Social Security Act for the Social Security Administration to determine Medicaid eligibility of SSI beneficiaries. For all other individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, the state requires a separate Medicaid application and determines financial eligibility based on SSI income and resource methodologies.

2. State Eligibility Determination (SSI Criteria State)

The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility based on SSI income and resource methodologies.

3. State Eligibility Determination (209(b) State)

The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility using income and resource methodologies more restrictive than SSI.

#### **B.** Additional information (optional)

# Medicaid State Plan Eligibility

## Income/Resource Methodologies

#### Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

#### **Package Header**

O No

Package ID MS2019MS0006O

Submission TypeOfficialInitial Submission Date9/20/2019Approval Date10/18/2019Effective Date7/1/2019

**SPA ID** MS-19-0018

Superseded SPA ID New

User-Entered

The state will apply the methodologies as described below, and consistent with 42 CFR 435.601, 435.602, and 435.831.

#### A. Basic Financial Methodology

- 1. The state applies the income and resource methodologies of the SSI program when determining eligibility for a population based on age (65 or older) or having blindness or a disability, with the exceptions described below in B. through G.
- 2. The state applies the financial methodologies of either the SSI program or the AFDC program in effect as of July 16, 1996 (whichever is most closely related) when determining eligibility for a population based on age (as a child), pregnancy, or status as a caretaker relative, with the exceptions described below in B. through G.

## **B.** Use of Less Restrictive Methodologies

1. The state elects to apply income and/or resources methodologies that are less restrictive than those used under the cash assistance programs, in
accordance with 42 CFR 435.601(d).
• Yes

2. The less restrictive income and resource methodologies are described on the RU for each applicable eligibility group.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

#### **Package Header**

Package ID MS2019MS0006O

Submission Type Official

Approval Date 10/18/2019

Superseded SPA ID New

User-Entered

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

## **C. Financial Responsibility of Relatives**

1. In determining financial eligibility for an individual, the state does not include income and resources from anyone other than the individual's spouse, and for individuals under age 21 or who have blindness or disability, the individual's parent.

> a.The state includes the income and resources of a spouse or parent only when they are living with the individual in the same household, except as follows:

> > i. In the case of spouses who are age 65 or older or who have blindness or disability and who share the same room in a Medicaid institution, the state:

- (1) Considers these couples either as living together or as living separately for the purpose of counting income and resources, whichever is more advantageous to the couple.
- (2) Considers these couples as living separately for the purpose of counting income and

ii. Where applicable, the state determines income and resource eligibility consistent with the spousal impoverishment rules of section 1924 of the Act, as described in the Resource Assessment and Eligibility reviewable

b. In the case of individuals under age 21 for whom AFDC is the most closely related cash assistance program, the income and resources of parents and spouses are included only if the individual would have been considered a dependent under the state's approved AFDC state plan in effect as of July 16, 1996.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

**SPA ID** MS-19-0018

Submission Type Official

Initial Submission Date 9/20/2019

**Approval Date** 10/18/2019

Effective Date 7/1/2019

Superseded SPA ID New

User-Entered

## **D. Family Size**

- 1. The family size of an individual for whom the SSI income and resource methodologies are used (as described in section A) includes the persons identified below:
  - a. The individual applying, or
  - b. If the individual lives together with his or her spouse, the individual applying and the spouse, or
  - c. If the individual lives together with his or her parent(s) and the individual is under 21 or has blindness or a disability, the individual applying and the parent(s).
- 2. The family size of an individual for whom the AFDC income and resource methodologies are used (as described in section A.), includes the persons who would have been included in the family under the state's July 16, 1996 AFDC state plan, except where the state has elected to use the MAGI-like methodologies (as described in section E).
- 3. The state defines family size for one or more of the following FPL eligibility groups to include others beyond those identified in D.1. and D.2.

O Yes

No

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official Initial Submission Date 9/20/2019

**SPA ID** MS-19-0018

Approval Date10/18/2019Effective Date7/1/2019

Superseded SPA ID New

User-Entered

# **E. Use of MAGI-like Methodologies**

<ol> <li>The state uses MAGI-like methodologies for one or more popula</li> </ol>	ations for whom the most clo	osely related cash assistance <sub>l</sub>	orogram would be the AFDC
program in effect as of July 16, 1996.			

Yes

No

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Initial Submission Bata 0/20/2010

**Submission Type** Official

Initial Submission Date 9/20/2019

Approval Date 10/18/2019

Effective Date 7/1/2019

**SPA ID** MS-19-0018

Superseded SPA ID New

User-Entered

## F. Countable Income Deductions for the Medically Needy

In determining countable income for individuals who are age 65 or older or who have blindness or a disability, the state deducts:

- 1. Amounts that would be deducted in determining eligibility under SSI.
- 2. The highest amounts that would be deducted in determining eligibility for optional state supplements if these supplements are paid to all individuals who are receiving SSI or would be eligible for SSI except for their income.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

# **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID New

User-Entered

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

**G.** Additional Information (optional)

# **Medicaid State Plan Eligibility**

## **Mandatory Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID MS-19-0009-elig TMA

User-Entered

#### **SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

## **Mandatory Coverage**

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

#### **Families and Adults**

Eligibility Group Name		Covered In State Plan	Include RU In Package 🕢	Included in Another Submission Package	Source Type 🛭
Infants and Children under Age 19	P	✓		0	CONVERTED
Parents and Other Caretaker Relatives	P	$\checkmark$		0	CONVERTED
Pregnant Women	P	$\checkmark$		0	CONVERTED
Deemed Newborns	P	✓		0	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care	ø	<b>~</b>		0	NEW
Former Foster Care Children	P	$\checkmark$		0	NEW
Transitional Medical Assistance	P	$\checkmark$		0	APPROVED
Extended Medicaid due to Spousal Support Collections	9	<		0	NEW

#### Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package 😯	Included in Another Submission Package	Source Type 😯
SSI Beneficiaries	P	<b>✓</b>		0	NEW
Closed Eligibility Groups	P	✓		0	NEW
Individuals Deemed To Be Receiving SSI	P	✓		0	NEW
Working Individuals under 1619(b)	P	✓		0	NEW
Qualified Medicare Beneficiaries	P	✓		0	NEW
Qualified Disabled and Working Individuals	9	$\checkmark$		0	NEW
Specified Low Income Medicare Beneficiaries	<b>9</b>	<b>✓</b>		0	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package ②	Included in Another Submission Package	Source Type 😯
Qualifying Individuals	ø	<b>✓</b>		0	NEW

## **Mandatory Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

Approval Date 10/18/2019

Superseded SPA ID MS-19-0009-elig TMA

User-Entered

B. The state elects the Adult Group, described at 42 CFR 435.119.

O Yes O No

C. Additional Information (optional)

# **Eligibility Groups Deselected from Coverage**

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

N/A

# **Medicaid State Plan Eligibility**

## **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID MS-13-0019

User-Entered

#### **SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

## **A.** Options for Coverage

The state provide	s Medicaid to	specified o	ptional gi	roups of individuals.

400	Yes	No

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

#### **Families and Adults**

Eligibility Group Name		Covered In State Plan	Include RU In Package 🛭	Included in Another Submission Package	Source Type 😯
Optional Coverage of Parents and Other Caretaker Relatives	P			0	NEW
Reasonable Classifications of Individuals under Age 21	<b>9</b>	<b>V</b>		0	CONVERTED
Children with Non-IV-E Adoption Assistance	P	<b>✓</b>		0	CONVERTED
Independent Foster Care Adolescents	P	<b>✓</b>		0	CONVERTED
Optional Targeted Low Income Children	ø			0	NEW
Individuals above 133% FPL under Age 65	<b>1</b>			0	NEW
Individuals Needing Treatment for Breast or Cervical Cancer	<b>1</b>	~		0	NEW
Individuals Eligible for Family Planning Services	Ø			0	NEW
Individuals with Tuberculosis	P			0	NEW
Individuals Electing COBRA Continuation Coverage	ø	✓		0	NEW

## Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type 🕢
Individuals Eligible for but Not Receiving Cash Assistance	9			0	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package 🚱	Included in Another Submission Package	Source Type 🕢
Individuals Eligible for Cash Except for Institutionalization	P	✓	$\checkmark$	0	APPROVED
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules	P	✓		0	NEW
Optional State Supplement Beneficiaries	9			0	NEW
Individuals in Institutions Eligible under a Special Income Level	P	✓	<b>~</b>	0	APPROVED
PACE Participants	<b>9</b>			0	NEW
Individuals Receiving Hospice	P			0	NEW
Children under Age 19 with a Disability	P	<b>✓</b>		$\circ$	NEW
Age and Disability- Related Poverty Level	P			0	NEW
Work Incentives	P	✓	$\checkmark$	0	APPROVED
Ticket to Work Basic	9			0	NEW
Ticket to Work Medical Improvements	P			0	NEW
Family Opportunity Act Children with a Disability	9			0	NEW
Individuals Receiving State Plan Home and Community-Based Services	P			0	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers	P			0	NEW

## **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Initial Submission Date 9/20/2019

**Approval Date** 10/18/2019

Effective Date 7/1/2019

**SPA ID** MS-19-0018

Superseded SPA ID MS-13-0019

Submission Type Official

User-Entered

# **B.** Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medically needy.



## **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID MS-13-0019

User-Entered

## 6O **SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

# **C. Additional Information (optional)**

## **Eligibility Groups Deselected from Coverage**

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

# **Medicaid State Plan Eligibility**

# Eligibility Groups - Options for Coverage

## Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

Individuals who would be eligible for federal cash assistance or an optional state supplement, except for institutionalization.

## **Package Header**

 Package ID
 MS2019MS0006O
 SPA ID
 MS-19-0018

 Submission Type
 Official
 Initial Submission Date
 9/20/2019

 Approval Date
 10/18/2019
 Effective Date
 7/1/2019

 Superseded SPA ID
 2001-09

Jan Sate

User-Entered

The state covers the optional Individuals Eligible for Cash Except for Institutionalization eligibility group in accordance with the following provisions:

#### **A. Characteristics**

1 Are in a medical institution

\_\_ c. AFDC

Individuals qualifyi	ng under this	eligibility group	must meet the	following criteria:

2. Would meet the eligibility requirements for at least one of the following cash assistance programs, but for the lower income standards used to determine eligibility for institutionalized individuals:
☑ a. SSI
☐ b. Optional State Supplement

# Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package IDMS2019MS00060SPA IDMS-19-0018Submission TypeOfficialInitial Submission Date9/20/2019

Approval Date 10/18/2019 Effective Date 7/1/2019

Superseded SPA ID 2001-09
User-Entered

## **B.** Individuals Covered

B. Individuals Covered		
1. The state covers all individuals v	who meet the characteristics described in section A.	
○ Yes		
● No		
2. The state covers the following pop	ulations:	
	☑ a. Individuals age 65 or older	
	☑ b. Individuals who have blindness	
	☑ c. Individuals who have a disability	
	d. All children under a specified age limit:	
	e. Reasonable classifications of children	
	f. Parents and other caretaker relatives	
	g. Pregnant women	
	h. Other population	

## Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID 2001-09

User-Entered

# **C. Financial Methodologies**

1. In calculating household income and resources for individual	s who are seeking eligibility on the basis of being age 65 or older or having blindness or
disability, SSI methodologies are used. Please refer as necessar	ry to Non-MAGI Methodologies, completed by the state.

3	Less restrict	ive methodologies	are used in	calculating	countable income.
Э.	ress restrict	ive illetilodologies	are useu iii	carculating	countable income.

O Yes

No

4. Less restrictive methodologies are used in calculating countable resources.

Yes

O No

The less restrictive resource methodologies are:

☑ General resource disregard:

Name of disregard:	Description:
A dollar amount of resources in excess of the resource standard is disregarded.	\$2,000 (for an institutionalized individual) (TN. No. 2000-01)

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

Real property not otherwise excluded is disregarded.

**Description of disregard:** Home property; life estate interests;

remainder interests; undivided heir interests, 16th section land leases; and housing on government or Indian-owned land that are countable under SSI policy under certain conditions. Income producing property is excluded if it produces a net annual return to the client of at least 6% of the equity value. (TN. No. 92-03)

The state uses a less restrictive methodology with respect to resources set aside for burial.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial	(1) \$6,000 in revocable burial funds is excluded. (TN. No. 92-03)  (2) Burial spaces for family
	members with any degree of relationship are excluded. (TN. No. 92-03)

☑ The value of a countable life insurance policy is disregarded.

**Description of disregard:** Up to \$10,000 in total face values of all life insurance policies on an individual is excluded. (TN. No. 99-

☑ The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

☑ A motor vehicle is disregarded under specific conditions.

Specified conditions:

 $\ensuremath{{\ensuremath{ \square}}}$  Household goods and services are disregarded as a resource. Oil, mineral or timber rights are disregarded as a resource. 

**Description:** (1) 2 vehicles for applicants or

recipients under the age of 19 are excluded. (TN. No. 19-0018)

(2) Any vehicle not used for transportation that is permanently inoperable (junk vehicle) is excluded. (TN. 92-03)

**Description of disregard:** Household goods and personal effects are disregarded from resources per SSI policy beginning April, 2005. Personal property that is not excluded under SSI policy is disregarded up to \$5,000 in equity value. Equity in excess of \$5,000 is counted. (TN. No. 92-03)

**Description of disregard:** Ownership of mineral rights or timber rights not under production is disregarded as a resource. (TN. No. 92-03)

Name of resource type:	Description:
Liquid promissory note or mortgages	Liquid promissory notes or mortgages as nonbusiness income producing property, provided the note produces a 6% net annual return of the principal balance rather than excluding only non-liquid or non-negotiable promissory notes under the income-producing property exclusion as per SSI policy. (TN. No 92-03)
Spenddown of resources	Eligibility is allowed to exist for the entire month when an individual or couple meet the resource test at any time during the month. (TN. No. 92-03)
Earmarking of excess resources	Funds earmarked for payment of prior month(s) nursing facility expenses that would allow Medicaid eligibility in the current month or retroactive period are excluded. Income that has converted to resources during the pending of a Medicaid application which are in excess of the resource standard but are equal to or less than the patient liability calculated for the months in which the application was pending. (TN. No. 92-03)
Valuation of real property	Current Market Value (CMV) of real property is established using the county tax assessed true value as shown on the county tax receipt. If an applicant or recipient disagrees with the tax assessed value of any countable real property, a knowledgeable source statement is used to establish CMV. (TN. No. 16-0009)

## Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

 Package ID
 MS2019MS00060
 SPA ID
 MS-19-0018

**Submission Type** Official **Initial Submission Date** 9/20/2019

Approval Date 10/18/2019 Effective Date 7/1/2019

Superseded SPA ID 2001-09 User-Entered

## **D. Income Standard Used**

The income standard used is the standard of the most closely related cash assistance program.

## **E. Resource Standard Used**

The resource standard used is the standard of the most closely related cash assistance program.

# Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

**SPA ID** MS-19-0018

Submission Type Official

**Initial Submission Date** 9/20/2019

**Approval Date** 10/18/2019

Effective Date 7/1/2019

Superseded SPA ID 2001-09 User-Entered

# F. Additional Information (optional)

# Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

## Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

Individuals who are in medical institutions for at least 30 consecutive days who are eligible under a special income level.

## **Package Header**

 Package ID
 MS2019MS00060
 SPA ID
 MS-19-0018

**Submission Type** Official **Initial Submission Date** 9/20/2019

Approval Date10/18/2019Effective Date7/1/2019

Superseded SPA ID 2001-09 User-Entered

The state covers Individuals in Institutions Eligible under a Special Income Level in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Have been in a medical institution for at least 30 consecutive days.
- 2. Have income at or below a standard described in section D.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

 Package ID
 MS2019MS00060
 SPA ID
 MS-19-0018

Submission TypeOfficialInitial Submission Date9/20/2019Approval Date10/18/2019Effective Date7/1/2019

Superseded SPA ID 2001-09

User-Entered

## **B.Individuals Covered**

<ul> <li>1. The state covers all individuals who meet the characteristics described in section A.</li> <li>Yes</li> <li>No</li> </ul>
2. The state covers the following populations:
☑ a. Individuals age 65 or older
c. Individuals who have a disability
d. Pregnant women
e. All Individuals under age 21, or a lower age
f. Reasonable classifications of children.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

Approval Date 10/18/2019

Superseded SPA ID 2001-09

User-Entered

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

#### C. Financial Methodologies

- 1. In calculating household income, the methodologies of the most closely related cash assistance program are used, except that disregards are not
- 2. In calculating household resources, the methodologies of the most closely related cash assistance program are used Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 3. Less restrictive methodologies are used in calculating countable resources.

Yes

O No

The less restrictive resource methodologies are:

General resource disregard:

Name of disregard:	Description:
A dollar amount of resources in excess of the resource standard is disregarded.	\$2,000 (for an institutionalized individual) (TN. No. 2000-01)

Real property not otherwise excluded is disregarded.

**Description of disregard:** Home property; life estate interests; remainder interests; undivided heir interests, 16th section land leases; housing on government or Indian owned land that are countable under SSI policy under certain conditions. Income producing property is excluded if it produces a net annual return to the client of at least 6% of the equity value.

(TN. No. 92-03)

The state uses a less restrictive methodology with respect to resources set aside for burial.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial	(1) \$6,000 in revocable burial funds is excluded. (TN. No. 92-03) (2) Burial spaces for family members with any degree of relationship are excluded. (TN. No. 92-03)

☑ The value of a countable life insurance policy is disregarded.

**Description of disregard:** Up to \$10,000 in total face values of

life insurance policies on an individual is excluded. (TN. No. 99-15)

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

☑ Household goods and services are disregarded as a resource.
$\ensuremath{ \ensuremath{ oxed{ }} }$ Oil, mineral or timber rights are disregarded as a resource.
☑ A specified type of resource is disregarded:

Specified conditions:	
Description:	(1) 2 vehicles for applicants or recipients under the age of 19 are excluded. (TN. No. 19-0018) (2) Any vehicle not used for transportation that is permanently inoperable (junk vehicle) is excluded. (TN. 92-03)
Description of disregard:	Household goods and personal effects are disregarded from resources per SSI policy beginning April 2005. Personal property that is not excluded under SSI policy is disregarded up to \$5,000 in equity value. Equity in excess of \$5,000 is counted. (TN. No. 92-03)

Description of disregard: Ownership of mineral rights or timber rights not under production is disregarded as a resource. (TN. No. 92-

03)

Name of resource type:	Description:
Liquid promissory notes or mortgages	Liquid promissory notes or mortgages as nonbusiness income producing property, provided the note produces a 6% net annual return of the principal balance rather than excluding only non-liquid or non-negotiable promissory notes under the income-producing property exclusion as per SSI policy. (TN. No 92-03)
Spenddown of resources	Eligibility is allowed to exist for the entire month when an individual or couple meet the resource test at any time during the month. (TN. No. 92-03)
Earmarking of excess resources	Funds earmarked for payment of prior month(s) nursing facility expenses that would allow Medicaid eligibility in the current month or retroactive period are excluded. Income that has converted to resources during the pending of a Medicaid application which are in excess of the resource standard but are equal to or less than the patient liability calculated for the months in which the application was pending. (TN. No. 92-03)

Name of resource type:	Description:
Valuation of real property	Current Market Value (CMV) of real property is established using the county tax assessed true value as shown on the county tax receipt. If an applicant or recipient disagrees with the tax assessed value of any countable real property, a knowledgeable source statement is used to establish CMV. (TN. No. 16-0009)

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Initial Submission Date 9/20/2019

**SPA ID** MS-19-0018

Effective Date 7/1/2019

**Approval Date** 10/18/2019

Superseded SPA ID 2001-09

Submission Type Official

User-Entered

## **D. Income Standard Used**

The income standard for this group is:

1. 300% of the SSI Federal Benefit Rate (FBR) for an individual

2. Other lower income level

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission TypeOfficialInitial Submission Date9/20/2019Approval Date10/18/2019Effective Date7/1/2019

**SPA ID** MS-19-0018

Superseded SPA ID 2001-09
User-Entered

## **E.Resource Standard Used**

The resource standard for this group is the one used for the most closely-related cash assistance program.

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Initial Submission Date 9/20/2019

**Approval Date** 10/18/2019

Effective Date 7/1/2019

**SPA ID** MS-19-0018

Superseded SPA ID 2001-09

Submission Type Official

User-Entered

# **F.Additional Information (optional)**

# Eligibility Groups - Options for Coverage

#### **Work Incentives**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

Individuals with a disability with income below 250% of the FPL, who would qualify for SSI except for earned income.

## **Package Header**

 Package ID
 MS2019MS00060
 SPA ID
 MS-19-0018

**Submission Type** Official **Initial Submission Date** 9/20/2019

Approval Date 10/18/2019 Effective Date 7/1/2019

Superseded SPA ID 2001-09

User-Entered

The state covers the optional Work Incentives eligibility group in accordance with the following provisions:

#### **A. Characteristics**

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Have earned income.
- 2. Meet the SSI definition of disability, but for earned income.
- 3. Meet income and resource standards following a two-step process, which includes:
  - a. Step One A comparison of family net income to 250% FPL; and
  - b. Step Two A comparison of individual net income and resources to the SSI standards, excluding earned income.

#### **Work Incentives**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID 2001-09

User-Entered

**SPA ID** MS-19-0018

**Initial Submission Date** 9/20/2019

Effective Date 7/1/2019

# **B. Step One Financial Methodologies and Income Test**

1. Financial methodologies

a. SSI methodologies are used in calculating family income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

General income disregard:

✓ Interest is disregarded.

Dividends are disregarded.

Name of disregard:	Description:
General Disregard	The \$20 General Exclusion is raised to \$50. SPA that initially approved: TN No 99-15

**Description of disregard:** Interest that does not exceed \$5 per

month (Total interest is not disregarded; only up to \$5 per month).

SPA that initially approved: TN No

99-15

**Description of disregard:** Dividends that do not exceed \$5 per

month (Total dividends are not disregarded; only up to \$5 per

month).

SPA that initially approved: TN No

99-15

A specified	tuno	of in	como i	c dicro	aardad.
A Specified	tvbe	OI III	come i	s uisi e	garueu.

Name of income type:	Description:
Royalty Income	Royalty income that does not exceed \$5 per month. SPA that initially approved: TN No 99-15

Specified less restrictive methodologies are used for the treatment of changes in income:

Name of methodology:	Description:
Annual Cost of Living #1	Annual cost of living increases in federal benefits that are in addition to title II benefits are disregarded in determining income through the month following the month in which the federal poverty level update is published.  SPA that initially approved: TN No 2001-09

Name of methodology:	Description:
Annual Cost of Living #2	Annual cost of living increases in federal benefits are disregarded when the federal poverty level update fails to increase at an equal or greater rate than the federal cost of living increase during the same year. The disregard of the cost of living increase will apply to increase(s) received by the eligible individual, couple and/or ineligible spouse until such time as the federal poverty level increase is greater than the previous cost of living increase.  SPA that initially approved: TN No 2001-09

☑ The following less restrictive methodologies are used:

Name of methodology:	Description:
In-kind Support and Maintenance	The value of in-kind support and maintenance is excluded. (TN No 92-03)
Couple Limit	The SSI budgeting practice requiring an eligible with an ineligible spouse to be eligible as an individual before being budgeted as a member of a couple is eliminated. It is replaced with one test using the eligible with an ineligible spouse budget whereby countable income is tested against the couple limit. (TN No 99-15)
Unearned income	Unearned income between the SSI limit and 135% of the federal poverty limit is disregarded. SPA that initially approved: TN No 2000-01.
Spouse as an Individual	Budget the spouse as an individual when the other spouse is eligible in a HCBS waiver program and the noninstitutional spouse is applying for at-home coverage. (TN No. 2000-01)

## 2. Income Test

Family net income must be less than 250% FPL. Please refer as necessary to Non-MAGI Methodologies for the definition of family size.

#### **Work Incentives**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS0006O | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

Approval Date 10/18/2019

Superseded SPA ID 2001-09

User-Entered

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

## C. Step Two Financial Methodologies and Income/Resource Test

1. Financial methodologies

a. SSI methodologies are used in calculating income and resources, except that earned income is not counted. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes

O No

The less restrictive income methodologies are:

✓ General income disregard:

✓ Interest is disregarded.

Dividends are disregarded.

Name of disregard:	Description:
General Disregard	The \$20 General Exclusion is raised to \$50. SPA that initially approved: TN No 99-15

**Description of disregard:** Interest that does not exceed \$5 per

month (Total interest is not disregarded; only up to \$5 per month). SPA that initially approved: TN No

99-15

**Description of disregard:** Dividends that do not exceed \$5 per

month (Total dividends are not disregarded; only up to \$5 per month). SPA that initially approved: TN No

99-15

☑ A specified type of income is disregarded:

Name of income type:	Description:
Royalty Income	Royalty income that does not exceed \$5 per month. SPA that initially approved: TN No 99-15

Specified less restrictive methodologies are used for the treatment of changes in income:

Name of methodology:	Description:
Annual Cost of Living #1	Annual cost of living increases in federal benefits that are in addition to title II benefits are disregarded in determining income through the month following the month in which the federal poverty level update is published.  SPA that initially approved: TN No 2001-09

Name of methodology:	Description:
Annual Cost of Living #2	Annual cost of living increases in federal benefits are disregarded when the federal poverty level update fails to increase at an equal or greater rate than the federal cost of living increase during the same year. The disregard of the cost of living increase will apply to increase(s) received by the eligible individual, couple and/or ineligible spouse until such time as the federal poverty level increase is greater than the previous cost of living increase.  SPA that initially approved: TN No 2001-09

 $\ensuremath{{\ensuremath{\,\overline{\!\!\mathcal M\!}}}}$  The following less restrictive methodologies are used:

Name of methodology:	Description:
Couple Limit	The SSI budgeting practice requiring an eligible with an ineligible spouse to be eligible as an individual before being budgeted as a member of a couple is eliminated. It is replaced with one test using the eligible with an ineligible spouse budget whereby countable income is tested against the couple limit. (TN No 99-15)
Spouse as an Individual	Budget the spouse as an individual when the other spouse is eligible in a HCBS waiver program and the non-institutional spouse is applying for at-home coverage. (TN No. 2000-01)
Unearned income	Unearned income between the SSI limit and 135% of the federal poverty limit is disregarded. SPA that initially approved: TN No 2000-01.
In-kind Support and Maintenance	The value of in-kind support and maintenance is excluded. (TN No 92-03)

c. Less restrictive methodologies are used in calculating countable resources.

Yes

O No

The less restrictive resource methodologies are:

☑ General resource disregard:

Name of disregard:	Description:
A dollar amount of resources in excess of the resource standard is disregarded.	The total disregard of resources is \$22,000 for an individual with an effective resource limit of \$24,000. For a couple the total disregard of resources is \$23,000 with an effective resource limit of \$26,000.

**Description of disregard:** Home property; life estate interests; remainder interests; undivided heir interests, 16th section land leases;

and housing on government or Indian-owned land that are countable under SSI policy under certain conditions. Income producing property is excluded if it produces a net annual return to the client of at least 6% of the equity value. (TN. No. 92-03)

The state uses a less restrictive methodology with respect to resources set aside for burial.

Specified methodology for the treatment of resources set aside for burial:

Name of methodology:	Description:
Burial	\$6,000 in revocable burial funds is excluded. (TN. No. 92-03) Burial spaces for family members with any degree of relationship are excluded. (TN. No. 92-03)

☑ The value of a countable life insurance policy is disregarded.

☑ Household goods and services are disregarded as a resource.

Oil, mineral or timber rights are disregarded as a resource.

**Description of disregard:** Up to \$10,000 in total face values of all life insurance policies on an individual is excluded. (TN. No. 99-

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

A motor vehicle is disregarded under specific conditions.

Specified conditions:

**Description:** (1) Two vehicles for applicants or recipients under the age of 19 are excluded.(TN. No. 19-0018)

> (2) Any vehicle not used for transportation that is permanently inoperable (junk vehicle) is excluded. (TN. No. 92-03)

**Description of disregard:** Household goods and personal effects are disregarded from resources per SSI policy beginning April, 2005. Personal property that is not excluded under SSI policy is disregarded up to \$5,000 in equity value. Equity in excess of \$5,000 is

counted. (TN. No. 92-03)

**Description of disregard:** Ownership of mineral rights or

timber rights not under production is disregarded as a resource. (TN.

No. 92-03)

A specified type of resource is disregarded:

Name of resource type:	Description:
Liquid promissory note or mortgages	Liquid promissory notes or mortgages as nonbusiness income producing property, provided the note produces a 6% net annual return of the principal balance rather than excluding only non-liquid or non-negotiable promissory notes under the income-producing property exclusion as per SSI policy. (TN. No 92-03)

Name of resource type:	Description:
Valuation of real property	Current Market Value (CMV) of real property is established using the county tax assessed true value as shown on the county tax receipt. If an applicant or recipient disagrees with the tax assessed value of any countable real property, a knowledgeable source statement is used to establish CMV. (TN. No. 16-0009)
Spenddown	Eligibility is allowed to exist for the entire month when an individual or couple meet the resource test at any time during the month. (TN. No. 92-03)

2. Income Test

For individuals who pass Step One, in Step Two, the individual's unearned income (plus deemed income, if appropriate) must be less than one of the following income standards:

a. The SSI income standard.

 $\hfill \bigcirc$  b. The income standard of the state supplement program.

3. Resource Test

The individual's resources must be less than the SSI resource standard.

## **Work Incentives**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Initial Submission Date 9/20/2019

**SPA ID** MS-19-0018

**Approval Date** 10/18/2019

Effective Date 7/1/2019

Superseded SPA ID 2001-09

Submission Type Official

User-Entered

## **D. Premiums and Cost Sharing**

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

## **Work Incentives**

MEDICAID | Medicaid State Plan | Eligibility | MS2019MS00060 | MS-19-0018

## **Package Header**

Package ID MS2019MS0006O

Submission Type Official

**Approval Date** 10/18/2019

Superseded SPA ID 2001-09

User-Entered

# E. Additional Information (optional)

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

PRA Disclosure Statement: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

This view was generated on 10/22/2019 10:47 AM EDT