

**STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT**

State of MICHIGAN

***Eligibility Conditions and Requirements***

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**Citation**

**Condition or Requirement**

B. Post-Eligibility Treatment of Institutionalized Individuals (continued)

3. For children, each family member:

AFDC level	\$ _____
Medically needy level	\$ <u>see Supplement 1</u>
Other as follows	\$ _____

4. Amounts for incurred medical expenses not subject to payment by a third party:

a. Health insurance premiums, deductibles and co-insurance charges;

b. Necessary medical or remedial care not covered under the Medicaid plan (Reasonable limits on amounts are described in Supplement 3 to Attachment 2.6-A).

5. An amount for maintenance of a single individual's home (includes apartments) for not longer than 6 months, if a physician has certified he or she is likely to return home within that period.

Yes. Amount for maintenance of home to equal the federal SSI benefit rate per month

No

1902(1) of the Act

6. SSI benefits paid under section 1611(e)(1)(E) and (G) of the Act to individuals who receive care in a hospital or NF.