# **Table of Contents**

State/Territory Name: Mississippi

State Plan Amendment (SPA) #: MS-19-0018

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Atlanta Regional Office 61 Forsyth Street, SW, Suite 4T20 Atlanta, Georgia 30303-8909



# Division of Medicaid and Children's Health Operations

October 18, 2019

Drew Snyder **Executive Director** Division of Medicaid 550 High Street, Suite 1000 Jackson, MS 39201

Re: Approval of State Plan Amendment MS-19-0018

Dear Mr. Snyder:

On September 20, 2019, the Centers for Medicare and Medicaid Services (CMS) received Mississippi State Plan Amendment (SPA) MS-19-0018 to To allow qualified Medicaid eligibles who are receiving Social Security Income (SSI) benefits, and are under the age of nineteen (19), to conintue to exclude two (2) automobiles. Those qualified beneficiaries that are over the age of nineteen (19) will only exclude one (1) automobile..

We approve Mississippi State Plan Amendment (SPA) MS-19-0018 on October 18, 2019 with an effective date(s) of July 01, 2019.

Name	Date Created
No iter	ns available

If you have any questions regarding this amendment, please contact Tandra Hodges at Tandra.Hodges@cms.hhs.gov.

Sincerely,

Davida R. Kimble

Acting Deputy Director Division of Medicaid Field Operations

Division of Medicaid and Children's **Health Operations** 

# **Submission - Summary**

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

#### **Package Header**

Package ID MS2019MS0006O

**SPA ID** MS-19-0018 Initial Submission Date 9/20/2019 Submission Type Official Approval Date 10/18/2019 Effective Date N/A

Superseded SPA ID N/A

#### **State Information**

State/Territory Name: Mississippi Medicaid Agency Name: Division of Medicaid

#### **Submission Component**

State Plan Amendment

Medicaid

○ CHIP

### **Submission - Summary**

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Superseded SPA ID N/A

**SPA ID** MS-19-0018

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

Effective Date N/A

### **SPA ID and Effective Date**

**SPA ID** MS-19-0018

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability	7/1/2019	MS-18-0003
Non-MAGI Methodologies	7/1/2019	New
Mandatory Eligibility Groups	7/1/2019	MS-19-0009-elig TMA
Optional Eligibility Groups	7/1/2019	MS-13-0019
Individuals Eligible for Cash Except for Institutionalization	7/1/2019	2001-09
Individuals in Institutions Eligible under a Special Income Level	7/1/2019	2001-09
Work Incentives	7/1/2019	2001-09

Page Number of the Superseded Plan Section or Attachment (If Applicable):

Supplement 8b to Attachment 2.6-A, Page 3

### **Submission - Summary**

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

#### **Package Header**

Package ID MS2019MS0006O

Submission Type Official

Initial Submission Date 9/20/2019

**Approval Date** 10/18/2019

Effective Date N/A

**SPA ID** MS-19-0018

Superseded SPA ID N/A

### **Executive Summary**

Summary Description Including State Plan Amendment (SPA) 19-0018 Treatment of Resources is being submitted to use Supplemental Security Goals and Objectives Income (SSI) rules in the treatment of vehicles for purposes of resource eligibility. One vehicle is totally excluded for adult applicants or recipients, if used for transportation. The value of other vehicles, not excluded under another provision, is determined using equity value.

### Federal Budget Impact and Statute/Regulation Citation

#### **Federal Budget Impact**

	Federal Fiscal Year	Amount
First	2019	\$0
Second	2020	\$0

#### Federal Statute / Regulation Citation

42 U.S.C. §§ 1396a

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created
No iter	ms available

### **Submission - Summary**

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 N/A

### **Governor's Office Review**

No comment

O Comments received

O No response within 45 days

Other

**SPA ID** MS-19-0018

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

Effective Date N/A

# **Submission - Public Comment**

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 N/A

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date N/A

Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- O Public notice was not federally required, but comment was solicited
- O Public notice was federally required and comment was solicited

# **Submission - Tribal Input**

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 N/A Superseded SPA ID N/A One or more Indian Health Programs or Urban Indian Organizations This state plan amendment is likely to have a direct effect on Indians, furnish health care services in this state Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan. Yes Yes ○ No O No The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA. Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission: Solicitation of advice and/or Tribal consultation was conducted in the following manner: All Indian Health Programs Date of solicitation/consultation: Method of solicitation/consultation: An e-mail notification was sent 6/4/19 and a Tribal meeting held with the 6/4/2019 Division of Medicaid on 6/12/19 to discuss this SPA. The Tribe offered no comments. All Urban Indian Organizations States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below: All Indian Tribes The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program. **Date Created** Name 9/10/2019 2:34 PM EDT MS SPA 19-0018 Treatment of Resources Tribal Notice Indicate the key issues raised (optional) Access Quality Cost Payment methodology Eligibility Benefits

# **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 | 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** 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 | MS2019MS0006O | MS-19-0018

#### **Package Header**

 Package ID
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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.

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

#### 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
○ No

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

#### **Package Header**

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### 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 resources.

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 unit.

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**

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**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

### **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.

○ Yes

No

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

# **Package Header**

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Approval Date 10/18/2019

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**SPA ID** MS-19-0018

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Effective Date 7/1/2019

# E. Use of MAGI-like Methodologies

1. The state uses MAGI-like methodologies for one or more populations for	whom the most closely related cash assist	ance program would be the AFDC
program in effect as of July 16, 1996.		

○ Yes

No

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

### **Package Header**

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### 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**

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**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 | 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

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#### **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 <b>②</b>	Included in Another Submission Package	Source Type 😯
Infants and Children under Age 19	P			0	CONVERTED
Parents and Other Caretaker Relatives	P			0	CONVERTED
Pregnant Women	P			0	CONVERTED
Deemed Newborns	P			0	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care	Ø			0	NEW
Former Foster Care Children	P	Г		0	NEW
Transitional Medical Assistance	P	С		0	APPROVED
Extended Medicaid due to Spousal Support Collections	ø	С		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			0	NEW
Closed Eligibility Groups	P			0	NEW
Individuals Deemed To Be Receiving SSI	P			0	NEW
Working Individuals under 1619(b)	<b>P</b>			0	NEW
Qualified Medicare Beneficiaries	P			0	NEW
Qualified Disabled and Working Individuals	P			0	
Specified Low Income Medicare Beneficiaries	<b>9</b>	С		0	N W

acpro.cms.gov/suite/ wtu

Eligibility Group Name		Covered In State Plan	Include RU In Package 🚱	Included in Another Submission Package	Source Type 😯
Qualifying Individuals	P			0	NEW

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

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### **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 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:

N/A

# **Medicaid State Plan Eligibility**

### **Optional Eligibility Groups**

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

### **Package Header**

Package ID MS2019MS0006O

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Approval Date 10/18/2019

Superseded SPA ID MS-13-0019

User-Entered

The state provides Medicaid to specified optional groups of individuals.

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

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

### **A. Options for Coverage**

paper-based state plan to MACPro):

• Yes • No			
The optional eligibility groups covered in the state	plan are (elections made in this screen ma	ay not be comprehensive during the tran	sition period from the

#### **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	Ø			0	NEW
Reasonable Classifications of Individuals under Age 21	Ø	⊏		0	CONVERTED
Children with Non-IV-E Adoption Assistance	<b>P</b>			0	CONVERTED
Independent Foster Care Adolescents	<b>P</b>	С		0	CONVERTED
Optional Targeted Low Income Children	<b>P</b>			0	NEW
Individuals above 133% FPL under Age 65	Ø			0	NEW
Individuals Needing Treatment for Breast or Cervical Cancer	Ø			0	NEW
Individuals Eligible for Family Planning Services	Ø			0	NEW
ndividuals with Tuberculosis	<b>P</b>			0	NEW
Individuals Electing COBRA Continuation Coverage	P	Г		0	NEW

### Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package 🔞	Included in Another Submission Package	Source Type 😯
	9			0	

719			calu State Flan Fillit		
Eligibility Group Name		Covered In State Plan	Include RU In Package <b>②</b>	Included in Another Submission Package	Source Type 🛭
Individuals Eligible for Cash Except for Institutionalization	Ø		Г	0	APPROVED
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules	Ø	Г		0	NEW
Optional State Supplement Beneficiaries	P			0	NEW
Individuals in Institutions Eligible under a Special Income Level	ø	С	С	0	APPROVED
PACE Participants	ø			0	NEW
Individuals Receiving Hospice	Ø			0	NEW
Children under Age 19 with a Disability	ø			0	NEW
Age and Disability- Related Poverty Level	P			0	NEW
Work Incentives	<b>®</b>			0	APPROVED
Ticket to Work Basic	<b>P</b>			0	NEW
Ticket to Work Medical	Ø			0	NEW
Family Opportunity Act Children with a Disability	ø			0	NEW
Individuals Receiving State Plan Home and Community-Based Services	ø			0	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers	<b>P</b>			0	NEW

### **Optional Eligibility Groups**

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

# **Package Header**

Package ID MS2019MS0006O

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Superseded SPA ID MS-13-0019

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 | MS2019MS0006O | MS-19-0018

### **Package Header**

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

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# **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
 MS2019MS00060
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 Submission Type
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 7/1/2019

 Superseded SPA ID
 2001-09

User-Entered

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

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:
1. Are in a medical institution.
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
□ c AFDC

**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

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# Individuals Eligible for Cash Except for Institutionalization

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

# **Package Header**

Package IDMS2019MS00060Submission TypeOfficial

**Approval Date** 10/18/2019

Superseded SPA ID 2001-09

2001-09 User-Entered

### **B.** Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.			
○Yes			
No			
2. The state covers the following populations:			
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

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**SPA ID** MS-19-0018

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### **C. Financial Methodologies**

1. In calculating household income and resources for individuals 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 necessary to Non-MAGI Methodologies, completed by the state.
3. Less restrictive methodologies are used in calculating countable income.
○ Yes • No
4. Less restrictive methodologies are used in calculating countable resources.

○ 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;

Real	property	not	otherwise	excluded	is	disregarded.

:	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 me	thodology with respect to resources set aside for burial.
	Specified methodology for the treatment of resources set aside for buria

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

The value of a countable life insura	ance 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. 99-15)

	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)
Household goods and services are disregarded as a resource.	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)
Oil, mineral or timber rights are disregarded as a resource.	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)
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 MS2019MS0006O

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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

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**SPA ID** MS-19-0018

Initial Submission Date 9/20/2019

Effective Date 7/1/2019

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 | MS2019MS0006O | 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 MS2019MS0006O

**SPA ID** MS-19-0018

Submission Type Official

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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.

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# **B.Individuals Covered**

1. The state covers all individuals who meet the characteristics described in section A.				
○Yes				
No     No				
2. The state encount the following require in an				
2. The state covers the following populations:				
a. Individuals age 65 or older				
b. Individuals who have blindness				
_ c. Individuals who have a disability				
d. Pregnant women				
e. All Individuals under age 21, or a lower age				
f. Reasonable classifications of children.				

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### C. Financial Methodologies

In calculating household income, the i			

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

○ 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; 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.

 $\hfill \Box$  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. 99-15)

Specified conditions:

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

☐ Household goods and services are disregarded as a resource.
Oil, mineral or timber rights are disregarded as a resource.
A specified type of resource is disregarded:

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-

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)
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-

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### **D. Income Standard Used**

### The income standard for this group is:

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

O 2. Other lower income level

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### **E.Resource Standard Used**

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

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

### Eligibility Groups - Options for Coverage

#### **Work Incentives**

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

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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.

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

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

○ 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-

**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-

$\Box$	A specified	type of	income	is r	lisregarded	4.

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
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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  Spouse as an Individual	Unearned income between the SSI limit and 135% of the federal poverty limit is disregarded. SPA that initially approved: TN No 2000-01.
	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)

#### 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.

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

1. Financia	l method	dologies
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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

○ No

The less restrictive income methodologies are:

General income disregard:

Interest is disregarded.

Dividends are disregarded.

A specified type of income is 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-

**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

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

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	
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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:	
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	n calculating	countable	resources

Yes

○ 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

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 asic	de for burial.		
Specified methodology for the treatment of resources set aside for burial:			
_ specified methodology for the treatmen	icorresources see asiae for barian		
	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.	Description of disregard:	Up to \$10,000 in total face values of all 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.			
	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)	
Household goods and services are disregarded as a resource.	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)	
Oil, mineral or timber rights are disregarded as a resource.	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:			
A specified type of resource is disregarded:			
	Name of resource type:	Description:	
		Liquid promissory notes or mortgages as nonbusiness	
	Liquid promissory note or mortgages	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.

O b. The income standard of the state supplement program.

3. Resource Test

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

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# **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.

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

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