TRANSMITTAL AND NOTICE OF APPROVAL OF	I. TRANSMITTAL NUMBER:	2. STATE		
STATE PLAN MATERIAL	10-010	Montana		
SIME I DAN MAIDRIAL				
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION: Title XIX of the			
FOR HEADIN CARE I INANCENCE ADMINISTRATION	Social Security Act (Medicaid)			
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE			
HEALTH CARE FINANCING ADMINISTRATION	January 1, 2010			
DEPARTMENT OF HEALTH AND HUMAN SERVICES	January 1, 2010			
5. TYPE OF PLAN MATERIAL (Check One):				
(				
☐ NEW STATE PLAN ☐ AMENDMENT TO BE	CONSIDERED AS NEW PLAN			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		amendment)		
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:			
1902(a)(10)(A)(i)(III); 1902(a)(10)(A)(i)(IV); 1905 (p);	a. FFY 2010 \$n/a			
1902(a)(10)(A)(ii)(I); 1902(a)(10)(A)(ii)(II); 1902(a)(10)(A)(ii)(III);	b. FFY 2011 \$n/a			
1902(a)(10)(A)(ii)(IV); 1902(a)(10)(A)(ii)(IX);				
1902(a)(10)(A)(ii)(XVII); and 1902(a)(10)(C)(i)(III) and 1931				
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8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS	-		
Complement 9h to Attachment 2.6 A man 2	OR ATTACHMENT (If Applicable):	•		
Supplement 8b to Attachment 2.6-A, page 2 Supplement 12a to Attachment 2-6-A, page 2	New Supplement 12a to Attachment 2-6-A, p	naga 7		
10. SUBJECT OF AMENDMEN'T:	Supplement 12a to Attachment 2-0-13,	Page 1		
Amendment to exclude the first resource purchased with excluded Native	• American funds as long as the nurchase	is clearly identifiable as		
being made with excluded funds. This would include the first transfer of				
excluded funds remained clearly identifiable. No fiscal impact is anticip				
these purchases/transfers.				
11. GOVERNOR'S REVIEW (Check One):		<b>\</b>		
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPEC	CIFIED:		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED				
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	LIC PETITING			
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO: Montana Dept. of Public Health and	Uuman Camiiaaa		
	Mary E. Dalton	riuman Scivices		
13. TYPED NAME: Mary E. Dalton	State Medicaid Director			
LA TUTE E CA A BA I' ' I D'	Attn: Jo Thompson			
14. TITLE: State Medicaid Director	PO Box 4210			
15. DATE SUBMITTED: 10/2/2010 - Key Led	Helena, MT 59604			
15. DATE SUBMITTED: 6/2/2010 - revised FOR REGIONAL OFFICE USE ONLY				
17 DATE RECEIVED	10 DATE ADDROVED.			
3/30/10	18. DATE AFFROYED: 6/18/10			
PLAN APPROVED - ON	E COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20. SIGNATURE OF REGIONAL OF	FICIAL:		
19. EFFECTIVE DATE OF APPROVED MATERIAL:				
21. TYPED NAME:	22. TITLE: Associate Regional	Adam in boundary		
Eichard C. Alten	ASSOCIATE REGIONAL	Administrator		
23. REMARKS:	U			

Revision: HCFA-PM-91-4 (BPD)

August 1991

Page 2

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

STATE: MONTANA

# MORE LIBERAL METHODS OF TREATING RESOURCES UNDER SECTION 1902 (r) (2) OF THE ACT

☐ Section 1902 (f) State

Non-Section 1902(f) State

1902(r)(2) of the Act

Consideration of more liberal resource policies under 1902(r)(2) are being applied to determine medical assistance eligibility.

Yer all groups, exclude the value of the first resource purchased with excluded Native American funds, as long as the purchase is clearly identifiable as being made with excluded funds. This would include the first transfer of excluded funds into a non-excluded account, so long as the excluded funds remained clearly identifiable.

These groups include those in sections1902(a)(10)(A)(i)(III); 1902(a)(10)(A)(i)(IV); 1905 (p); 1902(a)(10)(A)(ii)(I); 1902(a)(10)(A)(ii)(III); 1902(a)(10)(A)(ii)(IV); 1902(a)(10)(A)(ii)(IX); 1902(a)(10)(A)(ii)(XVII); and 1902(a)(10)(C)(i)(III) of the Act.

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

## STATE: MONTANA

#### ELIGIBILITY UNDER SECTION 1931 OF THE ACT

- One vehicle is excluded regardless of value. Additional vehicles are excluded if income producing (equity value of all remaining vehicles is counted).
- 3. Cash value of any life insurance policy is excluded from resources.
- 4. The first \$200 of each earner's earned income, plus 25% of each earner's remaining earned income, plus dependent care expenses up to \$200 per month per dependent is excluded without time limitation.
- 5. Earned or unearned income of an individual who is legally obligated to pay child support to non-household members is excluded to the extent the income is used to pay that support.
- 6. Earned income of a dependent child who is attending school is excluded.
- All grants, loans and scholarships directly related to the individual attending an institution of higher education/training are excluded as income and resources.
- 8. Gifts of \$50 or less per month per family member are excluded from income.
- All wages paid by the Census Bureau for temporary employment related to decennial Census activities are excluded.
- 10. Exclude the value of the first resource purchased with excluded Native American funds, as long as the purchase is clearly identifiable as being made with excluded funds. This would include the first transfer of excluded funds into a non-excluded account, so long as the excluded funds remained clearly identifiable.

The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

- 1. \$1000 of resources were excluded.
- Up to \$1500 equity value of one vehicle was excluded. Equity value in excess of \$1500 was applied to the allowable resource standard. Equity value of all other vehicles was counted.
- 3. Cash value of life insurance counted toward the allowable resource standard.
- 4. \$90 standard work expense, plus \$30 and 1/3\*, plus dependent care (up to \$175 per month per child for children over age two, and \$200 per month per child for children under age two.) \*1/3 disregard allowed for only 4 consecutive months, then not available again until the family has gone 12 consecutive months without an AFDC grant. The \$30 disregard continued for 8 months beyond the initial 4 consecutive months. These were allowed only is specific tests were passed.
- 5. Previously this income was countable.
- Earned income of a dependent child who was a full or part-time student, but was not a full-time employee was excluded.
- 7. Title IV grants were excluded for undergraduates. Other grants minus expenses directly related to attending the educational institution (i.e., fees, books, tuition, etc.) were

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FN No. <u>10-010</u> Supersedes TN No. <u>09-003</u>	Approval Date	4/18/10	Effective Date	01/01/10