DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Jacob K. Javits Federal Building 26 Federal Plaza Room 37-100 New York, New York 10278-0063



September 15, 2010

Donna Frescatore
Deputy Commissioner
Office of Health Insurance Programs
New York State Department of Health
Corning Tower - Empire State Plaza
Room 1441
Albany, New York 12237

Dear Ms. Frescatore:

We have completed our review of New York State Plan Amendment submittal 10-15, "Federal Increase to Resource Levels for the Medicare Savings Program (Attachment 2.2-A pages 9b and 9b1 and Attachment 2.6-A pages 22, 22a and 23) and find it acceptable for incorporation into New York's Medicaid Plan, effective April 1, 2010. Enclosed please find copies of State Plan Amendment 10-15 and Form CMS-179.

Please note that as agreed, we have substituted the originally submitted pages with the revised pages that New York State transmitted to our office via e-mail on August 30, 2010 and September 14, 2010.

If you have any questions or wish to discuss this further, please contact Patricia Ryan of my staff at 212-616-2436.

Sincerely,

/s/

Sue Kelly Associate Regional Administrator Division of Medicaid and Children's Health

Enclosures



ATTACHMENT 2.2-A Page 9b

State: New York				
Agency Citation	s(s) Groups Covered			
1902(a)(10)(E)(iv)	A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued) 25. Qualified Medicare Beneficiaries—			
and 1905(p)(3)(A)(ii) and 1860D-14(a)(3)(D) of the Act	i i i i i i i i i i i i i i i i i i i			
	(Medical Assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)			
1902(a)(10)(E)(ii), 1905(p)(3)(A)(i), 1905(p) and 1860D-14(a)(3)(D) of the Act	 26. Qualified disabled and working individuals a. Who are entitled to hospital insurance benefits under Section 1818A of the Act; b. Whose income does not exceed 200 percent of the 			
TN No. 10-15 Supersedes TN No. 93-27	Approval Date 1 5 2010 Effective Date April 1, 2010			

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ATTACHMENT 2.2-A Page 9b1

2.	tate: New York
Agency Citations	(s) Groups Covered
	 c. Whose resources do not exceed twice the maximum standard under SSI. d. Who are not otherwise eligible for medical assistance under Title XIX of the Act. (Medical assistance for this group is limited to Medicare Part A premiums under section 1818A of the Act.)
1902(a)(10)(E)(iii) 1905(p)(3)(A)(ii), and 1860D-14(a)(3)(D) of the Act	27. Specified Low-Income Medicare Beneficiaries—
	a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under 1818A of the Act.
	 b. Whose income is greater than 100 percent but less than 120 percent of the Federal poverty level; and c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.
· ·	(Medical assistance for this group is limited to Medicare Part B premiums under section 1839 of the Act.)
1902(a)(10)(E)(iv) 2 and 1905(p)(3)(A)(ii)	8. Qualified Individuals—
and 1860D-14(a)(3)(D) of the Act	 a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act); b. Whose income is at least 120 percent but less than 135 percent fo the Federal poverty level; c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.
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Supersedes I'N No. <u>93-27</u>	

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Revision:

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Citation		Condition or Requirement
	7.	Resource Standard - Medically Needy
		a. Resource standards are based on family size.
1902(a)(10)(C)(i) of the Act		b. A single standard is employed in determining resource resource eligibility for all groups.
	-	c. In 1902(f) States, the resource standards are more restrictive than in 7.b. above for
		Aged Blind Disabled
		Supplement 2 to ATTACHMENT 2.6-A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7.c., Supplement 2 to ATTACHMENT 2.6-A so indicates.
1902(a)(10)(E), 1905(p)(1)(D), 1905(p)(2)(B) and 1860D-14(a)(3)(D)	8.	Resource Standard - Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries and Qualifying Individuals
of the Act		For Qualified Medicare Beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, Specified Low-Income Medicare Beneficiaries covered under section 1902(a)(10)(E)(iii) of the Act, and Qualifying Individuals covered under 1902(a)(10)(E)(iv) of the Act, the resource standard is three times the SSI resource limit, adjusted annually since 1996 by the increase in the consumer price index.
		roval Date Effective DateApril 1, 2010

Revision:

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ATTACHMENT 2.6-A Page 22a

State: New York

Citation

Condition or Requirement

1902(a)(10)(E)(ii), 1905(s) and 1860D-14(a)(3)(D) of the Act

9. Resource Standard – Qualified Disabled and Working Individuals.

For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individual or a couple (in the case of an individual with a spouse) is two times the SSI resource limit.

1902(u) of the Act

10. For COBRA continuation beneficiaries, the resource standard is:

<u>X</u> Twice the SSI resource standard for an individual.

_ More restrictive standard as applied under section 1902(f) of the Act as described in Supplement 8 to Attachment 2.6-A.

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TN No: 10-15



State: New York

Citation

Condition or Requirement

1902 (u) of the Act

11. Excess Resources*

- a. Categorically Needy, Qualified
 Medicare Beneficiaries, Qualified
 Disabled and Working Individuals,
 and Specified Low-Income
 Medicare Beneficiaries, and
 Qualifying Individuals
- b. Categorically Needy Only

X This State has a section 1634 agreement with SSI. Receipt of SSI is provided for individuals while disposing of excess resources.

c. Medically Needy

Any excess resources make the individual ineligible.

• In accordance with Westmiller v. Sullivan, individuals are allowed to use incurred medical bills to offset excess resources and become eligible for Medicaid. See Supplement 8b to Attachment 2.6-A.

SEP 1 5 2010

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