H-600 EXTENDED MEDICAID

H-610 GENERAL INFORMATION

Medicaid coverage is protected for certain individuals who lose SSI/MSS eligibility.

To qualify for coverage in one of the Extended Medicaid programs, an applicant/<u>beneficiary</u> must have been eligible for both SSI (MSS) and RSDI in at least one month since April, 1977 and:

- Received both a SSI or MSS payment and a RSDI payment, or
- Received SSI and was entitled to RSDI.

Actual receipt of a SSI benefit is required, but only entitlement to, rather than actual receipt of, RSDI is required.

If a SSI recipient becomes entitled to RSDI benefits retroactively to a month in which he was receiving a SSI payment, the RSDI lump sum payment will be offset by the amount of the SSI payment. Even though the RSDI may offset the entire amount of SSI received, the individual still meets this requirement.

This requirement is met in situations where the individual is simultaneously entitled to RSDI and receiving a SSI or State supplemental payment for only one month, and that month is also the first month of entitlement to the RSDI benefit.

Example:

An individual who is already receiving SSI in June becomes entitled to RSDI effective that month as well. Entitlement to RSDI effective June 1 raises the individual's income to a point above the SSI income standard, and he/she loses SSI beginning July 1. The individual did not receive RSDI in June, because RSDI benefits are paid retrospectively; i.e. the benefit for June is not actually paid until July. However, the individual was entitled to RSDI as of June 1, the last month for which the individual was also eligible for and received a SSI benefit. Because entitlement to RSDI occurred in the same month as eligibility for and receipt of a

SSI benefit (June), the individual can qualify for eligibility under the PICKLE amendment provided all other eligibility requirements are met.

Verify that the individual received benefits and was eligible for the benefits in at least one month since April, 1977.

Verify in the following order:

- Case record documentation, if available, or
- SSA records, correspondence, or forms.

Note:

It may be necessary to request a payment history from SSA for SSI and RSDI, if verification cannot be established through SSA on-line files.

H-610.1 Extended Medicaid Programs

Extended Medicaid is provided for applicants/<u>beneficiaries</u> who meet all eligibility requirements for coverage:

- As Disabled Adult Children,
- As Disabled Widow/Widowers**,
- As Early Widow(er)s,
- Under the Pickle Amendment (result of the Lynch v. Rank decision), or
- As Disabled Widow(er)s/Divorced Spouses. **

All SSI eligibility factors must continue to be met. SSI income standards are used in combination with budgeting rules which allow the exclusion of certain benefits and COLAs.

If one member of a couple is applying he/she must be income eligible based on his/her income alone.

If a member of a couple is applying in any of the Widows/Widowers programs, verify with SSA that the remarriage did not cause the

applicant/beneficiary to lose the Extended Medicaid characteristics.

If both members of a couple meet the requirements for an Extended Medicaid program, determine their eligibility as a couple.

If they are ineligible as a couple they are both ineligible for Extended Medicaid. Do not determine eligibility as individuals.

H-610.2 Coverage

An Extended Medicaid <u>beneficiary</u> is eligible for the full range of Medicaid covered services.

H-620 DISABLED ADULT CHILDREN (DAC)

H-620.1 GENERAL INFORMATION

Public Law 99-643 requires continuing Medicaid eligibility for individuals who are at least age 18 who:

- Became blind or disabled before age 22, and
- Lost SSI eligibility on or after July 1, 1987, as the result of entitlement to or increase in Child Insurance Benefits under Title II of the Social Security Act (RSDI).

Child Insurance Benefits are received by dependents based on a parent's RSDI record. It is identified by the Beneficiary Identification Code (BIC) of "C" in the Social Security claim number. (Ex. 123-45-6789-C1)

In the Extended Medicaid eligibility determination for Disabled Adult Children, disregard:

- The amount of RSDI (DAC) entitlement or increase which causes SSI ineligibility, and
- All RSDI COLAs received after SSI eligibility was lost.

Note:

If the individual is receiving Child Insurance Benefits on more than one parent's record, disregard all amounts regardless of which one actually causes SSI ineligibility.

H-621 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-621.1 Determine Assistance/Benefit Unit

The assistance/benefit unit consists of the applicant/beneficiary.

H-621.2 Establish Categorical Requirement

SSA has determined that the applicant/<u>beneficiary</u> meets the blindness or disability requirement.

H-621.3 Establish Non-Financial Eligibility

Verify eligibility for the applicant/<u>beneficiary</u> with regard to the following factors:

| • | Assignment of Third Party Rights | <u>l-200</u> |
|---|---|---------------|
| • | Citizenship/Identity & Qualified Non-Citizen Status | <u>l-300</u> |
| • | Enumeration | <u>l-600</u> |
| • | Residence | <u>l-1900</u> |
| | | |

H-621.4 Establish Need

A. Determine Composition of the Income/Resource Unit

SSI Requirement: Loss of SSI

The income/resource unit consists of the:

- Applicant/<u>beneficiary</u>,
- Applicant/<u>beneficiary</u> and ineligible spouse living in the home, or
- Applicant/beneficiary who are a couple.

H-600

B. Determine Need/Countable Resources

Determine total countable resources of the members of the resource unit. Refer to I-1630, Need - SSI-Related Resources.

Compare the countable resources to the SSI resource limit for the number in the resource unit. Refer to Z-900 Resource Limits By Program.

If resources are greater than the limit, the applicant/beneficiary is ineligible for Extended Medicaid as a Disabled Adult Child.

If resources are equal to or less than the limit, the applicant/<u>beneficiary</u> is resource eligible for Extended Medicaid as a Disabled Adult Child.

C. Determine Need/Countable Income

Individual

If the applicant/<u>beneficiary</u> is an individual with no spouse or with an ineligible spouse with no income, complete the following steps:

- Step 1. Determine current RSDI.
- Step 2. Subtract the amount of RSDI entitlement or increase which caused SSI ineligibility.
- Step 3. Subtract all RSDI COLAs received subsequent to loss of SSI.
- Step 4. The remainder is the countable RSDI.
- Step 5. Add any other countable unearned income.
- Step 6. Subtract \$20 SSI disregard from unearned income.
- Step 7. Determine total gross earned income.
- Step 8. Subtract any remainder of \$20 SSI disregard from gross earnings.

- Step 9. Subtract earned income deduction from remaining gross earnings. Earned income deduction is \$65 and one half of remainder of earnings.
- Step 10. Combine remainders from Step 6 and Step 9.
- Step 11. Compare to Income Standard for Individual. If income is **equal to or** greater than the individual <u>Federal Benefit Rate</u> (FBR) limit, the applicant/beneficiary is ineligible.

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete budget steps 1 through 11 above using only the applicant/<u>beneficiary</u>'s income. If the income is **equal to or** greater than the individual limit, the applicant/<u>beneficiary</u> is ineligible and there is no deeming. If the applicant/<u>beneficiary</u>'s income is less than the FBR for one, apply deeming policy, I-1424.2 Income <u>Deeming Procedures</u>.

Note:

In the deeming process subtract COLAs from the RSDI of the ineligible spouse for the same years used for the applicant/<u>beneficiary</u>.

Couple

If both members of a couple are potentially eligible, complete steps 1 through 4 separately for each individual and go to Step 5.

- Step 1. Determine current RSDI.
- Step 2. Subtract the amount of RSDI entitlement or increase which caused SSI ineligibility.
- Step 3. Subtract all RSDI COLAs received subsequent to loss of SSI.
- Step 4. The remainder is the countable RSDI.
- Step 5. Add any other countable unearned income.
- Step 6. Subtract one \$20 SSI disregard per income unit, if applicable.
- Step 7. Determine total gross earnings.

- Step 8. Subtract any remainder of the \$20 SSI disregard from gross earnings .
- Step 9. Subtract one earned income deduction from the remaining gross earnings of the income unit. The earned income deduction is \$65 and one half of the remainder of the earnings.
- Step 10. Combine the remainders in Step 6 and Step 9.
- Step 11. Compare total countable income to the current <u>FBR</u> for a couple.

If the income is **equal to or** greater than the current FBR for a couple, the applicant/<u>beneficiary</u> are not eligible for Extended Medicaid as a Disabled Adult Child. Consider eligibility in MNP.

If the income is less than the current FBR for a couple, the applicants/<u>beneficiaries</u> are eligible for Extended Medicaid as a Disabled Adult Child.

H-621.5 Eligibility Decision

Evaluate all eligibility requirements and verification received to make the eligibility decision.

Reminder:

Explore Retroactive Medical Eligibility. Refer to H-1800.

H-621.6 Certification Period

The certification period cannot exceed 12 months.

H-621.7 Notice of Decision

Send the appropriate notice of decision to the applicant/beneficiary.

H-630 DISABLED WIDOWS/WIDOWERS (DW/W)

**The COBRA Act of 1985 required that states restore Medicaid eligibility to disabled widows/widowers who would be eligible for SSI had there been no elimination of the reduction factor and no subsequent COLAs. These individuals must have applied for Medicaid by December 1, 1988. There are no longer any people who qualify in this group in Louisiana. Due to this, all further information on this program has been removed. **

H-640 EARLY WIDOW/WIDOWERS (EW/W)

H-640.1 GENERAL INFORMATION

OBRA of 1987 (P.L. 100-203) extended Medicaid coverage effective July 1, 1988, to individuals who receive SSI prior to age 60 and are required to file for RSDI early widow(er)s benefits at age 60 to 65 as long as:

- They were receiving SSI prior to the month they began receiving SSA RSDI Widow(er) benefits,
- They would continue to be eligible for SSI if the amount of the SSA RSDI benefit were not counted as income, and
- They are not entitled to Part A Medicare.

Note:

Recipients of RSDI EW/W may become entitled to Part A Medicare prior to age 65 if:

- They qualify under renal dialysis or a kidney transplant provisions, or
- They may be concurrently drawing SSA disability benefits on his/her own SSN. Entitlement to Medicare based on this disability would begin with the 25th month of entitlement to such benefit.

H-641 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

^{**} Medicaid coverage for this program continues to age 65 or until the beneficiary becomes entitled to Part A Medicare.

H-641.1 Determine Assistance/Benefit Unit

The assistance/benefit unit consists of the applicant/beneficiary.

H-641.2 Establish Categorical Requirement

At the time of SSI loss due to income, SSA has determined that the applicant/beneficiary meets the blindness or disability requirement.

NOTE:

EW/W SSA benefits are entitled based on age and not disability. After 12 months from SSI loss, disability needs to be determined for the beneficiary.

H-641.3 Establish Non-Financial Eligibility

Verify eligibility for the applicant/<u>beneficiary</u> with regard to the following factors:

| • | Assignment of Third Party Rights | <u>l-200</u> |
|---|---|---------------|
| • | Citizenship/Identity & Qualified Non-Citizen Status | <u>l-300</u> |
| • | Enumeration | <u>l-600</u> |
| • | Medicare Ineligibility | <u>l-1100</u> |
| • | Residence | <u>l-1900</u> |
| • | SSI Requirement: Loss of SSI | H-600 |

H-641.4 Establish Need

A. Determine Composition of the Income/Resource Unit

The income/resource unit consists of the:

- Applicant/beneficiary,
- Applicant/beneficiary and ineligible spouse living in the

home, or

• Applicants/<u>beneficiaries</u> who are a couple.

B. Determine Need/Countable Resources

Determine total countable resources of the members of the resource unit. Refer to I-1630 Need - SSI-Related Resources.

Compare the countable resources to the SSI resource limit for the number in the resource unit. Refer to Z-900 Resource Limits By Program.

If resources are greater than the limit, the applicant/beneficiary is ineligible for Extended Medicaid as a Widow(er).

If resources are equal to or less than the limit, the applicant/<u>beneficiary</u> is resource eligible for Extended Medicaid as a Widow(er).

C. Determine Need/Countable Income

Individual

If the applicant/<u>beneficiary</u> is an individual with no spouse or with an ineligible spouse with no income, complete the following steps:

- Step 1. Disregard the full amount of Widow(er)s RSDI benefits.
- Step 2. Determine total unearned income.
- Step 3. Subtract \$20 SSI disregard from unearned income.
- Step 4. Determine total gross earned income.
- Step 5. Subtract any remainder of \$20 SSI disregard from gross earnings.
- Step 6. Subtract earned income deduction from remaining gross earnings. Earned income deduction is \$65 and one half of remainder of earnings.

- Step 7. Combine remainders from Step 3 and Step 6.
- Step 8. Compare to Income Standard for Individual. If income is **equal to or** greater than the individual FBR limit, the applicant/beneficiary is ineligible.

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete steps 1 through 8 above using only the applicant/<u>beneficiary</u>'s income. If the income is **equal to or** greater than the individual limit, the applicant/<u>beneficiary</u> is ineligible and there is no deeming. Consider MNP. If the applicant/recipient's income is less than the FBR for one, apply deeming policy, I-1424.2 Income Deeming Procedures.

Note:

In the deeming process subtract COLAs from the RSDI of the ineligible spouse for the same years used for the applicant/<u>beneficiary</u>.

Couple

If both members of a couple are potentially eligible, complete the following steps:

- Step 1. Disregard the full amount of Widow(er)s RSDI benefits.
- Step 2. Combine all unearned income of the couple
- Step 3. Subtract one \$20 SSI disregard from unearned income.
- Step 4. Combine all earned income of the couple.
- Step 5. Subtract any remainder of the \$20 SSI disregard from gross earnings.
- Step 6. Subtract one earned income deduction from the remaining gross earnings. The earned income deduction is \$65 and one half of the remainder of the earnings.
- Step 7. Combine the remainders in Step 3 and Step 6.
- Step 8. Compare total countable income to the current <u>FBR</u> for a couple.

If the income is **equal to or** greater than the current FBR for a couple, the applicant/<u>beneficiary</u> is not eligible for Extended Medicaid as an Widow(er). Consider eligibility in MNP.

If the income is less than the current FBR for a couple, the applicant/beneficiary is eligible for Extended Medicaid as a Widow(er).

H-641.5 Eligibility Decision

Evaluate all eligibility requirements and verifications received to make the eligibility decision. Retro decision could not be made prior to January 1988.

Reminder:

Explore Retroactive Medical Eligibility. Refer to H-1800.

H-641.6 Certification Period

The certification period cannot exceed 12 months.

Eligibility must end when the <u>beneficiary</u> becomes entitled to Medicare.

H-641.7 Notice of Decision

Send the appropriate notice of decision to the applicant/beneficiary.

H-650 PICKLE

H-650.1 GENERAL INFORMATION

Public Law 94-566, Section 503, protects Medicaid coverage for two different groups of aged, blind, or disabled persons who become ineligible for SSI or MSS as the result of:

- A cost of living increase in RSDI benefits, or
- Any other income reason.

Group One consists of individuals who:

- Are currently receiving RSDI benefits under Title II,
- Were eligible to receive both SSI/MSS and RSDI in at least one month since April 1, 1977 (Refer to H-610 General Information on entitlement requirements), and
- Lost SSI/MSS as the direct result of a RSDI COLA.

In the Extended Medicaid eligibility determination for Group One, disregard:

- The RSDI COLA that resulted in the termination of SSI/MSS, and
- All subsequent RSDI COLAs for the applicant/<u>beneficiary</u> and spouse.

Group Two consists of individuals who:

- Are currently receiving RSDI benefits under Title II,
- Were eligible to receive both SSI/MSS and RSDI in at least one month since April 1, 1977 (Refer to H-610 General Information on entitlement requirements), and
- Lost SSI/MSS eligibility for some income reason other

than a RSDI COLA (increase in or receipt of Title II [RSDI] or other income), and

 Would again be eligible for SSI except for COLAs received since the loss of SSI.

In the Extended Medicaid eligibility determination for Group Two, disregard all RSDI COLAs received after SSI/MSS eligibility was lost for the applicant/beneficiary and spouse.

H-651 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-651.1 Determine Assistance/Benefit Unit

The assistance/benefit unit consists of the applicant/beneficiary.

H-651.2 Establish Categorical Requirement

SSA has determined that the applicant/<u>beneficiary</u> meets the age, blindness, or disability requirement.

H-651.3 Establish Non-Financial Eligibility

Verify eligibility for the applicant/<u>beneficiary</u> with regard to the following factors:

Residence

| • | Assignment of Third Party Rights | <u>l-200</u> |
|---|---|--------------|
| • | Citizenship/Identity & Qualified Non-Citizen Status | <u>l-300</u> |
| • | Enumeration | <u>l-600</u> |

I-1900

SSI Requirement: Loss of SSI
H-600

H-651.4 Establish Need

A. Determine Composition of the Income/Resource Unit

The income/resource unit consists of the:

- Applicant/<u>beneficiary</u>,
- Applicant/<u>beneficiary</u> and ineligible spouse living in the home.
- A minor applicant/<u>beneficiary</u> and his parent(s) living in the home, or
- Applicant/beneficiary who are a couple.

B. Determine Need/Countable Resources

Determine total countable resources of the members of the resource unit including resources deemed from the parents of an applicant/<u>beneficiary</u> who is a minor. Refer to I-1630 Need - SSI-Related Resources, and to I-142, Need - Deeming.

Compare the countable resources to the SSI resource limit for the number in the resource unit. Refer to Z-900 Resource Limits By Program..

If resources are greater than the limit, the applicant/beneficiary is ineligible for Extended Medicaid under the Pickle Amendment.

If resources are equal to or less than the limit, the applicant/<u>beneficiary</u> is resource eligible for Extended Medicaid under the Pickle Amendment.

C-1. Determine Need/Countable Income for Group One

Individual

If the applicant/<u>beneficiary</u> is an individual with no spouse or with an ineligible spouse with no income, complete the following steps:

- Step 1. Determine current RSDI.
- Step 2. Subtract the amount of the RSDI COLA which caused SSI/MSS ineligibility.
- Step 3. Subtract all RSDI COLAs received subsequent to the loss of SSI.
- Step 4. The remainder is the countable RSDI.
- Step 5. Add any other countable unearned income.
- Step 6. Subtract \$20 SSI disregard from unearned income.
- Step 7. Determine total gross earned income.
- Step 8. Subtract any balance of \$20 SSI disregard from gross earnings.
- Step 9. Subtract earned income deduction of \$65 and one half of the remainder from remaining gross earnings.
- Step 10. Combine amounts from Steps 6 and 9.
- Step 11. Compare total countable income to the current <u>FBR</u> for Individual. If income is less than or equal to the individual limit, the applicant/beneficiary is income eligible.

Note:

An individual who loses SSI benefits because of receipt of a Title II (RSDI) COLA which increases their countable income to exactly the amount of the FBR (non-pay status EO1/NO1) is technically entitled to SSI and thus, Medicaid eligible under the Pickle Amendment (Group One).

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete steps 1 through 11 above using only the applicant's/<u>beneficiary</u>'s income. If the income is greater than the individual limit, the applicant/<u>beneficiary</u> is ineligible and there is no need to deem. Consider MNP. If the applicant's/recipient's income is **equal to or** less than the individual

limit, apply deeming policy, I-1424.2 Income Deeming Procedures.

Note:

In the deeming process, subtract COLAs from the RSDI of the ineligible spouse for the same years used for the applicant/<u>beneficiary</u>.

Parent(s) to Child Deeming

If the applicant/<u>beneficiary</u> is a minor child, apply deeming policy, I-1424.2 Income Deeming Procedures. Any income deemed from the parent(s) is considered unearned income of the applicant/beneficiary.

Couple

If both members of a couple are potentially eligible, complete Steps 1 through 4 separately for each individual and go to Step 5.

- Step 1. Determine current RSDI.
- Step 2. Subtract the amount of the RSDI COLA which caused SSI/MSS ineligibility.
- Step 3. Subtract all RSDI COLAs received subsequent to the loss of SSI.
- Step 4. The remainder is the countable RSDI.
- Step 5. Add any other countable unearned income.
- Step 6. Subtract one \$20 SSI disregard from unearned income.
- Step 7. Determine total gross earned income.
- Step 8. Subtract any balance of the \$20 SSI disregard from gross earnings.
- Step 9. Subtract one earned income deduction of \$65 and one half of the remainder from the remaining gross earnings of the income unit.
- Step 10. Combine the amounts from Steps 6 and 9.
- Step 11. Compare total countable income to the current FBR for a couple. If the income is less than or equal to the current FBR

for a couple, the applicants/<u>beneficiaries</u> are income eligible for Extended Medicaid under the Pickle Amendment.

Note:

An individual who loses SSI benefits because of receipt of a Title II (RSDI) COLA which increases their countable income to exactly the amount of the FBR (non-pay status EO1/NO1) is technically entitled to SSI and thus, Medicaid eligible under the Pickle Amendment (Group One).

C-2. Determine Need/Countable Income for Group Two

Individual

If the applicant/<u>beneficiary</u> is an individual with no spouse or with an ineligible spouse with no income, complete the following steps:

- Step 1. Determine current RSDI.
- Step 2. Subtract all RSDI COLAs received subsequent to the loss of SSI/MSS.
- Step 3. The remainder is the countable RSDI.
- Step 4. Add any other countable unearned income.
- Step 5. Subtract \$20 SSI disregard from unearned income.
- Step 6. Determine gross earned income.
- Step 7. Subtract any balance of \$20 SSI disregard from gross earnings.
- Step 8. Subtract earned income deduction of \$65 and one half of remainder from remaining gross earnings.
- Step 9. Combine amounts from Steps 6 and 8.
- Step 10. Compare total countable income to the current <u>FBR</u> for Individual. If income is equal to or greater than the individual limit, the applicant/beneficiary is income ineligible.

Exception:

If the increase in income is from Title II (RSDI) benefits compare the countable income to the current FBR for an individual. If the income is equal to the individual limit, the applicant/beneficiary is income eligible. If the increase in income is from a source other than Title II (RSDI) the income must be less than the individual limit for the person to be income eligible.

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete budget steps 1 through 10 above using only the applicant/<u>beneficiary</u>'s income. If the applicant/recipient's income is equal to or greater than the current FBR for an individual, the applicant/<u>beneficiary</u> is ineligible and there is no need to deem. If the applicant/<u>beneficiary</u>'s income is less than the FBR for one, apply deeming policy, I-1424.2 Income Deeming Procedures.

Exception:

If the increase in income is from Title II (RSDI) benefits compare the countable income to the current FBR for an individual. If the income is equal to the individual limit, the applicant/beneficiary is income eligible. If the increase in income is from a source other than Title II (RSDI) the income must be less than the individual limit for the person to be income eligible.

Note:

In the deeming process subtract COLAs from the RSDI of the ineligible spouse for the same years used for the applicant/beneficiary.

Parent(s) to Child Deeming

If the applicant/<u>beneficiary</u> is a minor child, apply deeming policy, I-1424.2 Income Deeming Procedures. Any income deemed from the parent(s) is considered unearned income of the applicant/beneficiary.

Couple

- Step 1. Determine current RSDI.
- Step 2. Subtract all RSDI COLAs received subsequent to the loss of

SSI/MSS.

- Step 3. The remainder is the countable RSDI.
- Step 4. Add any other countable unearned income.
- Step 5. Combine countable RSDI and unearned income for both members of the couple.
- Step 6. Subtract one \$20 SSI disregard per income unit.
- Step 7. Determine total gross earned income.
- Step 8. Subtract any balance of the \$20 SSI disregard from gross earnings.
- Step 9. Subtract one earned income deduction from the remaining gross earnings of the income unit.
- Step 10. Compare total countable income to the current <u>FBR</u> for a couple.

If the income is less than the current FBR for a couple, the applicants/<u>beneficiaries</u> are eligible for Extended Medicaid under the Pickle Amendment.

Exception:

If the increase in income is from Title II (RSDI) benefits compare the countable income to the current FBR for an individual. If the income is equal to the individual limit, the applicant/beneficiary is income eligible. If the increase in income is from a source other than Title II (RSDI) the income must be less than the individual limit for the person to be income eligible.

H-651.5 Eligibility Decision

Evaluate all eligibility requirements and verifications received to make the eligibility decision.

Reminder:

Explore Retroactive Medical Eligibility. Refer to H-1800.

H-651.6 Certification Period

The certification period cannot exceed 12 months.

H-651.7 Notice of Decision

Send the appropriate notice of decision to the applicant/beneficiary.

H-660 DISABLED WIDOW(ER)S AND DISABLED SURVIVING DIVORCED SPOUSES (DW/W/DS) **

H-660.1 GENERAL INFORMATION

<u>Under the OBRA Act of 1990</u> (Public Law 101-508, Section 5103), <u>Congress permanently revised the special, more restrictive disability standard for disabled widow(er)s to the disability standard that applies to all title II and SSI adult disability applicants.</u>

These public laws protect Medicaid coverage for Widow(er)s who become ineligible for SSI due to receipt of SSA Disabled Widow(er)'s Benefits age 50-59 as long as:

- They were receiving SSI for the month prior to the month they began receiving RSDI payments, and
- They would continue to be eligible for SSI if the amount of the RSDI benefit were not counted as income, and
- They are not entitled to Part A Medicare.

The <u>beneficiary</u> loses eligibility for DW/WS at entitlement to Part A Medicare. <u>Since DW/W/DS SSA benefits are based on disability</u>, each month of SSI eligibility, including non-pay status month, is counted <u>toward the individuals five month disability waiting period and twenty four month Medicare waiting period which will reduce (or eliminate) the normal wait for entitlement to disability benefits and/or Medicare twenty-four month waiting.</u>

H-661 ELIGIBILITY DETERMINATION PROCESS

Determine eligibility by applying the following criteria. The elements have been listed in the most logical order, but work on all steps simultaneously.

H-661.1 Determine Assistance/Benefit Unit

The assistance/benefit unit consists of the applicant/beneficiary.

H-661.2 Establish Categorical Requirement

SSA has determined that the applicant/beneficiary meets the blindness or disability requirement.

H-661.3 Establish Non-Financial Eligibility

Verify eligibility for the applicant/<u>beneficiary</u> with regard to the following factors:

| • | Assignment of Third Party Rights | I-200 |
|---|---|--------------|
| • | Citizenship/Identity & Qualified Non-Citizen Status | <u>l-300</u> |
| • | Enumeration | <u>l-600</u> |
| • | Medicare Ineligibility | I-1100 |
| • | Residence | I-1900 |
| • | SSI Requirement: Loss of SSI | H-600 |

H-661.4 Establish Need

A. Determine Composition of the Income/Resource Unit

The income/resource unit consists of the:

- applicant/beneficiary,
- applicant/<u>beneficiary</u> and ineligible spouse living in the home, or
- applicant/beneficiary who are a couple.

B. Determine Need/Countable Resources

Determine total countable resources of the members of the resource unit. Refer to I-1630 Need - SSI-Related Resources.

Compare the countable resources to the SSI resource limit for the number in the resource unit. Refer to Z-900 Resource Limits By Programs.

If resources are greater than the limit, the applicant/<u>enrollee</u> is ineligible for Extended Medicaid as a **Disabled W/W/DS.

If resources are equal to or less than the limit, the applicant/<u>enrollee</u> is resource eligible for Extended Medicaid as a **Disabled W/W/DS.

C. Determine Need/Countable Income

Individual

If the applicant/<u>beneficiary</u> is an individual with no spouse or with an ineligible spouse with no income, complete the following steps:

- Step 1. Determine current RSDI.
- Step 2. Subtract all Disabled W/W/DS RSDI benefits received.
- Step 3. Subtract all COLAs beginning with January 1992.
- Step 4. Add any other countable unearned income.
- Step 5. Subtract \$20 SSI disregard from unearned income.
- Step 6. Determine total gross earned income.
- Step 7. Subtract any remainder of \$20 SSI disregard from gross earnings.
- Step 8. Subtract earned income deduction from remaining gross earnings. Earned income deduction is \$65 and one half of remainder of earnings.
- Step 9. Combine remainders from Step 5 and Step 8.

Step 10. Compare to Income Standard for Individual. If income is equal to or greater than the individual limit, the applicant/beneficiary is ineligible.

Ineligible Spouse Deeming

If there is an ineligible spouse with income, complete budget steps 1 through 10 above using only the applicant/<u>beneficiary</u> income. If the income is *equal to or* greater than the individual limit, the applicant/<u>beneficiary</u> is ineligible and there is no deeming. If the applicant/recipient's income is less than the FBR for one, apply deeming policy, I-1424.2 Income Deeming Procedures.

Note:

In the deeming process, subtract COLAs from the RSDI of the ineligible spouse for the same years used for the applicant/<u>beneficiary</u>.

Couple

If both members of a couple are potentially eligible complete Steps 1 through 3 separately for each individual and go to Step 4.

- Step 1. Determine current RSDI.
- Step 2. Subtract all Disabled W/W/DS RSDI benefits received.
- Step 3. Subtract all COLAs beginning with January, 1992.
- Step 4. Add any other countable unearned income.
- Step 5. Subtract one \$20 SSI disregard per income unit.
- Step 6. Determine total gross earned income of the couple.
- Step 7. Subtract any remainder of the \$20 SSI disregard from gross earnings.
- Step 8. Subtract one earned income deduction from the remaining gross earnings of the income unit. The earned income deduction is \$65 and one half of the remainder of the earnings.
- Step 9. Combine the remainders in Step 5 and Step 8.

Step 10. Compare total countable income to the FBR for a couple.

If the income is *equal to or* greater than the current FBR for a couple, the applicants/<u>beneficiary</u> are not eligible for Extended Medicaid as a Disabled W/W/DS. Consider eligibility in MNP.

If the income is less than the current FBR for a couple, the applicants/<u>beneficiary</u> are eligible for Extended Medicaid as a Disabled W/W/DS.

H-661.5 Eligibility Decision

Evaluate all eligibility requirements and verification received to make the eligibility decision.

Reminder:

Explore Retroactive Medical Eligibility. Refer to H-1800.

H-661.6 Certification Period

The certification period cannot exceed 12 months.

H-661.7 **Notice of Decision**

Send the appropriate Notice of Decision to the applicant/beneficiary.