



# Medicaid Eligibility for Persons Age 65+ and Individuals with Disabilities: 2009 State Profiles

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## Summary

Medicaid is a means-tested, state-operated program providing health and long-term services and supports (LTSS) to certain people who are unable to afford private insurance or pay out-of-pocket for services. Under federal law, Medicaid has approximately 50 distinct eligibility groups; some are mandatory, meaning that states participating in Medicaid must cover them, while others are optional. People aged 65 and over and certain persons with disabilities are among the population groups who may qualify. Eligibility groups are differentiated, in part, by their income and asset thresholds. These financial thresholds are set by states within federal guidelines. The groups and thresholds that states cover determine who has access to Medicaid in that state and who does not.

At the request of states, Congress is currently debating whether and how to allow states to cut back on certain optional eligible populations. Congress demonstrated a similar interest in containing Medicaid eligibility, and therefore spending, around the time of passage of the Deficit Reduction Act of 2005 (DRA, P.L. 109-173). DRA amended federal law to create more limitations on coverage for people who might have transferred assets to meet Medicaid's means testing requirements. Although this interest in containing Medicaid eligibility is not new, Congress recently made changes to federal law to allow states additional options to expand coverage. Under the Patient Protection and Affordable Care Act (PPACA, P.L. 111-148), for example, states were provided new flexibility to extend coverage to certain people aged 65 and over and younger persons with disabilities with LTSS needs, among other populations.

Despite this activity, recent information to help Congress and other stakeholders evaluate how legislation would affect Medicaid eligibility for aged and disabled individuals is limited. Among the information that would be potentially helpful are profiles of states' eligibility rules. In 2009, CRS partnered with AARP's policy research group to conduct a survey of the 50 states and the District of Columbia's Medicaid eligibility rules for the major aged and disabled groups, including eligibility rules for accessing certain LTSS. This report presents the results of the survey by describing the major eligibility groups and other rules states used to allow people aged 65 and older and younger persons with disabilities to qualify for Medicaid in 2009. It also includes profiles of each state's eligibility rules.

The report begins with background on the general rules for determining eligibility in Medicaid for aged and disabled individuals. It then provides an explanation of the major eligibility groups about which states were surveyed and the income and resources thresholds associated with each of these groups. Next, the report provides a general explanation of the types of Medicaid services that individuals might be eligible to obtain, by eligibility group. Finally, profiles of each state and the District of Columbia are provided, including a description of the major groups covered and their associated financial thresholds. These state profiles include information on the types of Medicaid benefits that are available to beneficiaries by eligibility group.

## Contents

Introduction .....	1
Overview of Medicaid Eligibility for Aged and Disabled.....	2
Overview of Survey .....	4
Major Eligibility Groups .....	4
Spousal Impoverishment Rules .....	7
Post-Eligibility Treatment of Income by LTC Setting .....	8
Benefits by Eligibility Group .....	8
Traditional Benefits.....	8
Benefits for Medically Needy.....	9
Benefits for Individuals Qualifying through Institutional Rules .....	9
Home and Community-Based Services (HCBS) Waivers.....	9
Analysis of Selected Survey Findings.....	10
State Profiles.....	19
Alabama .....	20
Alaska.....	21
Arizona.....	22
Arkansas.....	23
California.....	25
Colorado.....	26
Connecticut.....	27
Delaware .....	28
District of Columbia.....	29
Florida .....	30
Georgia.....	31
Hawaii .....	32
Idaho .....	33
Illinois .....	34
Indiana.....	35
Iowa .....	36
Kansas .....	37
Kentucky .....	38
Louisiana .....	39
Maine .....	40
Maryland .....	41
Massachusetts .....	42
Michigan .....	43
Minnesota .....	44
Mississippi.....	45
Missouri.....	46
Montana.....	47
Nebraska.....	48
Nevada .....	49
New Hampshire .....	50
New Jersey .....	51
New Mexico .....	52

New York.....	53
North Carolina.....	54
North Dakota.....	55
Ohio.....	56
Oklahoma.....	57
Oregon.....	58
Pennsylvania.....	59
Rhode Island.....	60
South Carolina.....	61
South Dakota.....	62
Tennessee.....	63
Texas.....	64
Utah.....	65
Vermont.....	66
Virginia.....	67
Washington.....	68
West Virginia.....	69
Wisconsin.....	70
Wyoming.....	71

## Tables

Table 1. Medicaid Enrollment, by State and Basis of Eligibility for Aged and Disabled, FY2008.....	11
Table 2. Upper Income Threshold for Non-Working Aged and Disabled Medicaid Applicants, 2009.....	13
Table 3. Upper Income Threshold for Applicants Meeting the State’s Level-of-Care Criteria for Institutional LTSS.....	15
Table 4. Monthly Maintenance of Need Allowance (MMNA) for Enrollees in Home and Community-Based Waiver Services.....	17
Table 5. Eligibility Pathways for Medicaid and Long-Term Care in Alabama, 2009.....	20
Table 6. Eligibility Pathways for Medicaid and Long-Term Care in Alaska, 2009.....	21
Table 7. Eligibility Pathways for Medicaid and Long-Term Care in Arizona, 2009.....	22
Table 8. Eligibility Pathways for Medicaid and Long-Term Care in Arkansas, 2009.....	23
Table 9. Eligibility Pathways for Medicaid and Long-Term Care in California, 2009.....	25
Table 10. Eligibility Pathways for Medicaid and Long-Term Care in Colorado, 2009.....	26
Table 11. Eligibility Pathways for Medicaid and Long-Term Care in Connecticut, 2009.....	27
Table 12. Eligibility Pathways for Medicaid and Long-Term Care in Delaware, 2009.....	28
Table 13. Eligibility Pathways for Medicaid and Long-Term Care in the District of Columbia, 2009.....	29
Table 14. Eligibility Pathways for Medicaid and Long-Term Care in Florida, 2009.....	30
Table 15. Eligibility Pathways for Medicaid and Long-Term Care in Georgia, 2009.....	31
Table 16. Eligibility Pathways for Medicaid and Long-Term Care in Hawaii, 2009.....	32

Table 17. Eligibility Pathways for Medicaid and Long-Term Care in Idaho, 2009 .....	33
Table 18. Eligibility Pathways for Medicaid and Long-Term Care in Illinois, 2009 .....	34
Table 19. Eligibility Pathways for Medicaid and Long-Term Care in Indiana, 2009 .....	35
Table 20. Eligibility Pathways for Medicaid and Long-Term Care in Iowa, 2009 .....	36
Table 21. Eligibility Pathways for Medicaid and Long-Term Care in Kansas, 2009 .....	37
Table 22. Eligibility Pathways for Medicaid and Long-Term Care in Kentucky, 2009 .....	38
Table 23. Eligibility Pathways for Medicaid and Long-Term Care in Louisiana, 2009 .....	39
Table 24. Eligibility Pathways for Medicaid and Long-Term Care in Maine, 2009 .....	40
Table 25. Eligibility Pathways for Medicaid and Long-Term Care in Maryland, 2009 .....	41
Table 26. Eligibility Pathways for Medicaid and Long-Term Care in Massachusetts, 2009 .....	42
Table 27. Eligibility Pathways for Medicaid and Long-Term Care in Michigan, 2009 .....	43
Table 28. Eligibility Pathways for Medicaid and Long-Term Care in Minnesota, 2009 .....	44
Table 29. Eligibility Pathways for Medicaid and Long-Term Care in Mississippi, 2009 .....	45
Table 30. Eligibility Pathways for Medicaid and Long-Term Care in Missouri, 2009 .....	46
Table 31. Eligibility Pathways for Medicaid and Long-Term Care in Montana, 2009 .....	47
Table 32. Eligibility Pathways for Medicaid and Long-Term Care in Nebraska, 2009 .....	48
Table 33. Eligibility Pathways for Medicaid and Long-Term Care in Nevada, 2009 .....	49
Table 34. Eligibility Pathways for Medicaid and Long-Term Care in New Hampshire, 2009 .....	50
Table 35. Eligibility Pathways for Medicaid and Long-Term Care in New Jersey, 2009 .....	51
Table 36. Eligibility Pathways for Medicaid and Long-Term Care in New Mexico, 2009 .....	52
Table 37. Eligibility Pathways for Medicaid and Long-Term Care in New York, 2009 .....	53
Table 38. Eligibility Pathways for Medicaid and Long-Term Care in North Carolina, 2009 .....	54
Table 39. Eligibility Pathways for Medicaid and Long-Term Care in North Dakota, 2009 .....	55
Table 40. Eligibility Pathways for Medicaid and Long-Term Care in Ohio, 2009 .....	56
Table 41. Eligibility Pathways for Medicaid and Long-Term Care in Oklahoma, 2009 .....	57
Table 42. Eligibility Pathways for Medicaid and Long-Term Care in Oregon, 2009 .....	58
Table 43. Eligibility Pathways for Medicaid and Long-Term Care in Pennsylvania, 2009 .....	59
Table 44. Eligibility Pathways for Medicaid and Long-Term Care in Rhode Island, 2009 .....	60
Table 45. Eligibility Pathways for Medicaid and Long-Term Care in South Carolina, 2009 .....	61
Table 46. Eligibility Pathways for Medicaid and Long-Term Care in South Dakota, 2009 .....	62
Table 47. Eligibility Pathways for Medicaid and Long-Term Care in Tennessee, 2009 .....	63
Table 48. Eligibility Pathways for Medicaid and Long-Term Care in Texas, 2009 .....	64
Table 49. Eligibility Pathways for Medicaid and Long-Term Care in Utah, 2009 .....	65
Table 50. Eligibility Pathways for Medicaid and Long-Term Care in Vermont, 2009 .....	66
Table 51. Eligibility Pathways for Medicaid and Long-Term Care in Virginia, 2009 .....	67
Table 52. Eligibility Pathways for Medicaid and Long-Term Care in Washington, 2009 .....	68

Table 53. Eligibility Pathways for Medicaid and Long-Term Care in West Virginia, 2009..... 69  
Table 54. Eligibility Pathways for Medicaid and Long-Term Care in Wisconsin, 2009..... 70  
Table 55. Eligibility Pathways for Medicaid and Long-Term Care in Wyoming, 2009..... 71

## **Appendixes**

Appendix A. Eligibility Groups Excluded from the Survey..... 72  
Appendix B. Medicaid’s Resources Rules for Aged and Disabled Eligibility Pathways..... 73

## **Contacts**

Author Contact Information ..... 74  
Acknowledgments ..... 74

## Introduction

Medicaid is a means-tested health insurance program funded by both the federal and state governments. In 2009, the program covered 67.8 million low-income individuals in the United States.<sup>1</sup> People qualify for Medicaid if they meet the program's categorical thresholds and have income and assets equal to or below state-specified thresholds. Under federal law, Medicaid has approximately 50 distinct eligibility groups; some are mandatory, meaning that states participating in Medicaid must cover them, while others are optional. Eligibility groups are differentiated, in part, by their income and asset thresholds. These financial thresholds are set by states within federal guidelines. The groups and thresholds that states adopt determine who has access to coverage under Medicaid in that state and who does not.

Eligibility groups, and income and asset thresholds, vary considerably among states. For instance, individuals in similar circumstances of need for acute, post-acute, or long-term services and supports (LTSS) may be automatically eligible for coverage in one state, be required to assume a certain portion of their medical expenses before they can obtain coverage in a second state, and not be eligible at all in a third state.

At the request of states, Congress is currently debating whether and how to allow states to cut back on optional eligible populations.<sup>2</sup> Congress demonstrated a similar interest in containing Medicaid eligibility, and therefore spending, around the time of passage of the Deficit Reduction Act of 2005 (DRA, P.L. 109-173). DRA amended federal law to create more limitations on coverage for people who might have transferred assets to meet Medicaid's means testing requirements.<sup>3</sup> Although this interest in containing Medicaid eligibility is not new, Congress also recently made changes to federal law to allow states additional options to expand coverage. Under the Patient Protection and Affordable Care Act (PPACA, P.L. 111-148), for example, states were provided new flexibility to extend coverage to certain people aged 65 and over and younger persons with disabilities with long-term services and supports (LTSS) needs,<sup>4</sup> among other populations.

Current information to help Congress and other stakeholders evaluate how legislation would affect Medicaid eligibility for aged and disabled individuals is limited. Among the information that would be potentially helpful are profiles of states' eligibility rules. The last time such comprehensive state profiles were available was in 2003, when the results of a 50-state survey on eligibility, conducted by CRS and the American Public Human Services Association (APHSA), were made available on the APHSA website.<sup>5</sup>

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<sup>1</sup> Congressional Budget Office, "Spending and Enrollment Detail for CBO's March 2009 Baseline: Medicaid," Washington, DC. At <https://www.cbo.gov/budget/factsheets/2009b/medicaid.pdf>. This figure is the total number of individuals enrolled in Medicaid at any point during the fiscal year and include enrollment in the territories.

<sup>2</sup> For more information, see CRS Report R41835, *Medicaid and CHIP Maintenance of Effort (MOE): Requirements and Responses*, by Evelyne P. Baumrucker.

<sup>3</sup> For more information, see CRS Report RL33593, *Medicaid Coverage for Long-Term Care: Eligibility, Asset Transfers, and Estate Recovery*, by Julie Stone.

<sup>4</sup> For more information, see CRS Report R41210, *Medicaid and the State Children's Health Insurance Program (CHIP) Provisions in PPACA: Summary and Timeline*, coordinated by Julie Stone.

<sup>5</sup> This information is no longer available on the APHSA website.

In 2009, CRS partnered with AARP's research policy group to conduct a survey of each state and the District of Columbia's Medicaid eligibility rules for the major aged and disabled groups, including eligibility rules for accessing certain LTSS. The survey was web-based, but numerous follow-up calls to clarify unclear, confusing, or blank survey responses were made. Except Alabama, all states and the District of Columbia responded. To complete Alabama's survey, information on the state's website and waiver application was used. Additional information about states' Medicaid Buy-In programs was obtained from Mathematica Policy Research, Inc.<sup>6</sup> When needed, state section 1915(c) waiver applications were used to verify eligible populations.<sup>7</sup>

This report presents the survey results for all the major eligibility groups and other rules states use to allow people aged 65 and older and younger persons with disabilities to qualify for Medicaid. All information is based on 2009 rules and data and therefore does not include any changes made to eligibility by PPACA. An explanation of the eligibility groups not included in this survey is provided in **Appendix A**.

The report begins with background on the general rules for determining eligibility in Medicaid for aged and disabled individuals. It then provides an explanation of the major eligibility groups about which states were surveyed and the income and resources thresholds associated with each of these groups. Next, the report provides a general explanation of the types of Medicaid services that individuals might be eligible to obtain, by eligibility group. Finally, profiles of each state and the District of Columbia are provided, including a description of the major groups covered and their associated financial thresholds. These state profiles include information on the types of Medicaid benefits that are available to beneficiaries by eligibility group.

## Overview of Medicaid Eligibility for Aged and Disabled

Medicaid is a means-tested, state-operated program providing health and LTSS to certain people who are unable to afford private insurance or pay out-of-pocket for services. To qualify for Medicaid, an individual must meet both categorical and financial eligibility requirements. Categorical eligibility requirements relate to the age or other characteristics of an individual. People aged 65 and over and certain persons with disabilities are among the categories of individuals who may qualify.<sup>8</sup>

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<sup>6</sup> Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

<sup>7</sup> To grant states additional flexibility to offer a broad range of home and community-based LTSS as an alternative to institutional care, Congress authorized the use of the HCBS waiver program under section 1915(c) of the Social Security Act in 1981. To date, most states have chosen to make these waivers available to targeted populations (other states have used section 1115 waivers for similar purposes). Section 1915(c) gives states the option to extend a broad range of home and community-based services to selected populations of individuals with the level-of-need that would otherwise be offered in Medicaid-covered institutions, such as a nursing home, ICF/MR, or a hospital. For HCBS waivers to be approved, states also must meet other requirements, such as a cost-effectiveness test, under which average Medicaid expenditures for waiver participants do not exceed costs that would have been incurred if these individuals resided in institutions.

<sup>8</sup> Some aged and disabled recipients apply to Medicaid as children after being born with disabling conditions; others apply as working-age adults with inherited or acquired disabling conditions, and still others enroll much later as aging retirees who have lost the ability to care for themselves.



The program's financial eligibility requirements place limits on the amount of income and resources or assets individuals may possess and still be eligible for Medicaid. These thresholds, or standards, specify the maximum amount of countable income and resources a person may have to qualify; income and resources above these amounts generally make an individual ineligible for coverage. The specific income and asset limitations that apply to each eligibility group are set through a combination of federal parameters and state definitions.<sup>9</sup>

In addition to categorical and financial requirements, individuals in need of LTSS may be required to meet level-of-care eligibility criteria that demonstrate difficulty performing activities necessary for self-care and independent living.<sup>10</sup> Many Medicaid beneficiaries with disabilities and individuals aged 65 and older have complex health conditions that require specialized care.<sup>11</sup> Many have multiple chronic conditions, physical disabilities, and/or cognitive impairments. A number of beneficiaries have limitations in activities of daily living (ADLs), such as bathing, dressing, feeding, and toileting; and/or instrumental activities of daily living (IADLs), such as managing money, shopping, getting around outside the house, and taking medications.

Traditionally, Medicaid eligibility rules for aged and disabled individuals have been linked to the federal cash welfare program, Supplemental Security Income (SSI).<sup>12</sup> To qualify for SSI, a person must satisfy the program criteria for age or disability and meet SSI's income and resources requirements. For adults, disability is defined as the inability to engage in substantial gainful activity (SGA) by reason of a medically determinable physical or mental impairment expected to result in death or last at least 12 months. In general, the worker must be unable to do any kind of work that exists in the national economy, taking into account age, education, and work experience. A child under the age of 18 may qualify as disabled if he or she has an impairment that results in "marked and severe" functional limitations.<sup>13</sup> Individuals receiving SSI automatically qualify for Medicaid in all but 11 209(b) states that may use financial and disability criteria that are more restrictive than SSI.

Other non-SSI pathways for aged and disabled individuals are generally required to use SSI's rules for counting income and assets, as well as SSI's definition of disability.<sup>14</sup> Examples include the more restrictive SSI-related pathways used by 209(b) states, the 100% of federal poverty level (FPL) pathway, medically needy pathways for people with high medical expenses, and buy-in pathways for working disabled individuals. However, section 1902(r)(2) of the Social Security Act grants states flexibility to modify the financial (but not disability) criteria for these pathways. This provision allows states to use more liberal thresholds for computing income and resources than are specified under SSI. Some states use section 1902(r)(2) to ignore or disregard certain types or amounts of income and assets, thereby extending Medicaid to individuals with income and/or assets too high to otherwise qualify under the specified rules for that eligibility pathway. Additional information about Medicaid's countable resource rules is provided in **Appendix B**.

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<sup>9</sup> The federal government mandates states to meet certain minimum eligibility standards and gives states flexibility to establish additional criteria that are more generous and, in some limited instances, more restrictive.

<sup>10</sup> The survey did not ask about level-of-care criteria, which can vary state.

<sup>11</sup> See Tables 3B, 4B, and 5B, Medicaid and CHIP Payment and Access Commission (MACPAC), *Report to Congress: The Evolution of Managed Care in Medicaid*, Washington, DC, June 2011.

<sup>12</sup> For more information about SSI program rules, see CRS Report 94-486, *Supplemental Security Income (SSI)*, by Umar Moulta-Ali.

<sup>13</sup> See CRS Report 94-486, *Supplemental Security Income (SSI)*, by Umar Moulta-Ali.

<sup>14</sup> In this report, the terms *pathway* and *eligibility group* are used interchangeably.

To understand which aged and disabled individuals in each state are eligible for Medicaid, the survey solicited information on the major eligibility groups they cover and what the states' income and resource thresholds are for each of those groups. In addition, it requested information on spousal impoverishment and post-eligibility treatment of income for beneficiaries receiving LTSS in a nursing home or HCBS waiver.

## Overview of Survey

The following is an explanation of these major eligibility groups and other rules, including background on the federal rules for setting income thresholds. The state profiles, presented later in this report, provide more detailed information on the groups each state has selected as well as the income and resources thresholds by group.

Additional survey questions asked states to report on their use of section 1902(r)(2) to deviate from SSI program rules (usually used by states for counting income and resources) for the income and resources counting. These results are not included in the state profiles below.

## Major Eligibility Groups

States were surveyed about their income and asset rules for the one mandatory pathway relevant to this population. This pathway is based on the program rules for the Supplemental Security Income (SSI) program. It is described below in two parts: SSI-related and SSI-related: 209(b).

1. **SSI-related:** Federal law requires states to provide Medicaid coverage to recipients of SSI and relies on SSI eligibility rules, established at the national level, as the basis for Medicaid eligibility for aged and disabled individuals who are not receiving SSI. To qualify for SSI, a person must satisfy the program criteria for age or disability and meet SSI's income and resources requirements. In addition, applicants must meet certain citizen and residency requirements.
2. **SSI-related: 209(b):** Under section 209(b) of the Social Security Amendments of 1972 (P.L. 92-603), states may elect to use eligibility criteria, including income and resources thresholds that are more restrictive than SSI but no more restrictive than those in effect on January 1, 1972. Unlike non-209(b) states, receipt of SSI does not guarantee eligibility for Medicaid in a 209(b) state. These 11 209(b) states may require persons to meet a lower income threshold than SSI's or may use more restrictive policies for defining countable income. They may also have lower limits for the amount of resources a person may have. Each of the 209(b) states has at least one eligibility standard (income, resources, or definition of disability) that is more restrictive than SSI thresholds. States that use more restrictive eligibility rules under section 209(b) must also allow applicants to deduct medical expenses from countable income when determining eligibility. This process is sometimes referred to as the "209(b) spend-down."<sup>15</sup>

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<sup>15</sup> An example of 209(b) spend-down is as follows: if an applicant has a monthly income of \$700 (not including any SSI or certain other cash payments) and the states' maximum allowable income standard for spend-down eligibility is \$600, the applicant would qualify for Medicaid after incurring \$100 in medical expenses in that month. As discussed below, the spend-down process is also used in establishing eligibility for the medically needy.

Other optional pathways for aged and disabled applicants use the SSI program's definition of disability for eligibility purposes.

3. **Income up to 100% of the Federal Poverty Level (FPL, 100% FPL):** The enactment of the Omnibus Budget Reconciliation Act of 1986 (OBRA 86) offered states an option for covering persons whose income exceeds SSI or 209(b) levels. This option allows states to cover aged or disabled individuals with incomes up to 100% of the FPL (\$903 for an individual and \$1,214 for a couple per month in 2009) as long as they meet the SSI definition for aged or disabled. States use the same resources rules for this eligibility pathway as they use for the SSI groups.
4. **Medicaid Buy-In (Buy-In):** Many individuals with disabilities who work have historically been ineligible for Medicaid because their incomes were too high. Congress established special rules to help guarantee health insurance for certain working individuals with disabilities for whom employer-sponsored health insurance is not available. Two statutory authorities have established what is known as the Medicaid Buy-In groups. These authorities have created three distinct Buy-In options.
  - a. The first option was established by the Balanced Budget Act of 1997 (BBA 97, P.L. 105-33). BBA 97 allows states to extend Medicaid coverage to working individuals with disabilities whose family's net income, after exclusions following the SSI income counting methodology, does not exceed 250% of FPL.<sup>16</sup> Under BBA 97, states are also permitted to establish cost-sharing whereby a person with a disability who is working purchases or "buys into" Medicaid coverage through the payment of premiums and/or co-payments.
  - b. The second option, referred to as the Basic Eligibility group, was established by the Ticket to Work and Work Incentives Improvement Act of 1999 (TWWIIA, P.L. 106-170). For this Basic group, TWWIIA provisions allow states to expand Medicaid coverage to working individuals with disabilities between the ages of 16 and 64. Under this option, states may establish state-defined income and resource levels that are not limited by the 250% of FPL under BBA 97's option one authority. Further, this option establishes limitations on the amounts of premiums and other cost-sharing that beneficiaries could pay.
  - c. The third Buy-In option, referred to as the Medical Improvement Group, is available only to those states that cover the Basic Eligibility group. Under this option, also established under TWWIIA, states may continue to cover people who still have a significant impairment. Individuals must be employed and earning at least the federal minimum wage and must be working at least 40 hours per month. The state may establish a different definition of employment subject to the approval of the Secretary of the Department of Health and Human Services (HHS).

The medically needy optional pathway is intended for applicants with high medical expenses relative to their income and who meet SSI's definition of aged or disabled.

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<sup>16</sup> States may also disregard additional income and resources under section 1902(r)(2) of the Social Security Act. There is no limit on the amount of additional income and resources that may be disregarded under section 1902(r)(2).

5. **Medically Needy (MN):** Under this eligibility group, aged or disabled individuals qualify when their medical expenses (on such things as nursing home [NH] care, prescription drugs, etc.) deplete, or “spend down,” their income and assets to specified Medicaid thresholds. For example, if an individual has monthly income of \$1,000 and the state’s income threshold is \$480, then the applicant would be required to incur \$520 in out-of-pocket medical expenses before he or she would be eligible for Medicaid. States use a specific time period for calculating a person’s medical expenses, often referred to as a “budget period,” generally ranging from one to six months.<sup>17</sup> States may also use spend down groups to extend Medicaid coverage to persons who are members of one of the broad categories of Medicaid covered groups (i.e., are aged or have a disability) but do not meet the applicable income requirements and, in some instances, resources requirements for other eligibility pathways.

The Special Income Rule is intended for applicants with higher income and who require a level of care offered in an institution.

6. **Special Income Rule, Miller Trust:** States also have an option to extend coverage of certain institutional services, as well as other traditional benefits, to individuals who are in nursing facilities or other institutions. States can establish a special income rule, known as “the 300% rule,” to allow these persons to qualify for Medicaid coverage of their NH care and other institutional long-term services and supports. To be eligible, persons must (1) require care provided by a NH or other medical institution for no less than 30 consecutive days, (2) meet the resources threshold determined by the state, and (3) have income that does not exceed a specified level—no greater than 300% of the maximum SSI payment applicable to a person living at home (\$2,022 per month in 2009).

Medicaid law requires those states that use only the special income rule, and not the medically needy pathway, to allow applicants to place income in excess of the special income level in a special Miller Trust, and receive Medicaid coverage for their care. States that use the combination of the special income rule with a Miller Trust effectively allow individuals to qualify for institutional care and Medicaid’s traditional benefits with higher income. Following the individual’s death, the state becomes the beneficiary of amounts in this trust.

The Katie Beckett and hospice only coverage pathways are also optional groups about which states were surveyed.

7. **Katie Beckett:** To address the barriers to home and community-based care for certain children with disabilities,<sup>18</sup> Medicaid law allows states to extend

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<sup>17</sup> The calculation becomes the basis for determining the amount of a person’s spend-down requirement. Generally a shorter time period is more beneficial to the applicant. For example, if the state has a one-month spend-down calculation period, the individual would be required to incur \$520 in medical expenses in a month, after which services would be covered by Medicaid. On the other hand, if the state had a six-month calculation period, the individual would have to incur a projected amount of \$3,120 (\$520 times six) in medical expenses before Medicaid would begin coverage. The length of the spend-down period does not significantly affect total out-of-pocket expenditures for persons with predictable and recurring medical expenses, such as persons with chronic illnesses or disabling conditions. However, individuals faced with acute nonrecurring problems generally benefit more from a shorter calculation period.

<sup>18</sup> Generally, Medicaid rules require that the income and resources of the parents of a child with a disability (under age 21) be automatically considered available for medical care expenses; they are “deemed” to the child. These deeming (continued...)

Medicaid coverage to certain disabled children under 18 who are living at home and who would be eligible for Medicaid if in a hospital, nursing facility, or an intermediate care facility for the mentally retarded (ICF/MR). Under the Katie Beckett option, the state must determine that (1) the child requires the level of care provided in an institution, (2) it is appropriate to provide care outside the facility, and (3) the cost of care at home is no more than institutional care. States electing this option are required to cover all disabled children who meet these criteria on a statewide basis.

8. **Hospice Only Coverage:** Medicaid law allows states to cover, as an eligibility group, individuals who are terminally ill and elect to receive hospice care only,<sup>19</sup> provided that they would be eligible for Medicaid if they were in a medical institution.<sup>20</sup>

## Spousal Impoverishment Rules

States were also surveyed about their spousal impoverishment rules. These rules are intended to prevent the impoverishment of a spouse whose husband or wife seeks Medicaid coverage for institutional LTSS or home and community-based services (HCBS) waivers. These rules address the treatment of income and assets of married couples, allowing the community spouse to retain higher amounts of income and assets (on top of non-countable assets such as a house, car, etc.) than allowed under general Medicaid rules.

Regarding income, federal law exempts all of a community spouse's income (e.g., pension or Social Security) in his or her name from being considered available to the other spouse for purposes of Medicaid eligibility. For community spouses with limited income, federal law allows institutionalized spouses to transfer income to the community spouse up to a state-determined maximum level. Federal law specifies that this limit may be no greater than \$2,739 per month, and no less than \$1,821 per month in 2009 (same amounts for 2010, the most recent year available). Regarding assets, federal law allows states to select the amount of assets a community spouse may be allowed to retain. It specified that this limit could not exceed \$109,560 in 2009 (same amount for 2010, the most recent year available) and could be no less than \$21,912 in total countable assets in 2009 (same amount for 2010, the most recent year available).<sup>21</sup>

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(...continued)

rules have presented eligibility barriers for children with disabilities who could be provided needed care in their homes. If the same child is institutionalized, however, after the first month away from home, the child no longer is considered to be a member of the parent's household and only the child's financial resources are considered available for care. The child then is able to qualify for Medicaid.

<sup>19</sup> Social Security Act §1902(a)(10)(A)(ii)(VII); State Medicaid Manual, Pub. 45, §3580 et seq.

<sup>20</sup> Hospice generally covers palliative medical care, that is, relief from pain, and supportive social and counseling services for terminally ill beneficiaries and their families. Services are provided primarily in the patient's home, but may also be provided in institutional settings, such as NHs.

<sup>21</sup> For purposes of determining how many assets the community spouse may retain, all assets of the couple are combined, counted, and split in half, regardless of which of the two spouses possesses ownership. If the community spouse's assets are less than the state standard, then the Medicaid beneficiary must transfer his or her share of the assets to the community spouse until the community-spouse's share reaches the standard. All other non-exempt assets must be depleted before the applicant can qualify for Medicaid.

## **Post-Eligibility Treatment of Income by LTC Setting**

Finally, the survey solicited information from states about the amounts they allow beneficiaries receiving certain LTC services to retain for *personal needs allowances* and *monthly maintenance needs allowances (MMNA)*. Once eligible for Medicaid, persons qualifying through certain eligibility groups are required to apply their income above specified amounts toward the cost of their care. The amounts they may retain vary by setting. For example, Medicaid beneficiaries in a NH may retain a personal needs allowance. Persons receiving services in home and community-based settings may retain an MMNA, which is higher than a personal needs allowance because it is intended to pay for the living expenses of a person living in the community. These amounts vary by states. All income amounts above these levels, including what may be available in a Miller Trust, must be applied toward the cost of their care.

## **Benefits by Eligibility Group**

Not all Medicaid benefits that a state offers in its program are available to all Medicaid beneficiaries. The benefits a Medicaid beneficiary is eligible for depend, in part, upon the eligibility group through which the individual enters Medicaid. The following provides a brief description of the types of benefits that are available to beneficiaries based on eligibility group. The state profiles that follow show which type of benefits are available to which group of beneficiaries.

### **Traditional Benefits**

Once enrolled in Medicaid, individuals who entered the program through SSI-related, 100% FPL, Buy-In, and special income rule groups are entitled to what are often referred to as “traditional Medicaid benefits.”<sup>22</sup> Traditional Medicaid benefits include a broad, and often comprehensive, range of mandatory and optional benefits. Examples of benefits that are mandatory for these aged and disabled individuals include inpatient hospital services (excluding services for mental disease); services provided by federally qualified health centers; laboratory and x-ray services; physician services; and home health care for those entitled to NH care. Nursing home services for individuals age 21 and over are also a mandatory benefit for categorically needy eligibility groups.

The optional benefits available under Medicaid vary across states. Examples of optional benefits that states cover are prescribed drugs (covered by all states); routine dental care; physician-directed clinic services; services provided by other licensed practitioners (e.g., optometrists, podiatrists, psychologists); inpatient psychiatric care for the elderly and for individuals under age 21; nursing facility services for individuals under age 21; and consumer-directed personal care attendant services beginning in 2011.

In addition, the breadth of coverage for a given mandatory or optional benefit can and does vary from state to state. For example, states may place different limits on the amount of inpatient

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<sup>22</sup> Beginning in 2006, as an alternative to traditional benefits, states were given the option to provide what are called “benchmark” benefit packages to certain Medicaid subpopulations. These plans can also be limited to substate areas.

hospital services a beneficiary can receive in a year (e.g., up to 15 inpatient days per year in one state versus unlimited inpatient days in another state).

## **Benefits for Medically Needy**

Special benefit rules apply to optional medically needy populations. States may offer a more restrictive benefit package than is provided to “aged” and “disabled” populations under the traditional benefits rules, but at a minimum, must offer (1) prenatal, delivery, and postpartum services for pregnant women; (2) ambulatory services as defined in the state Medicaid plan for individuals under 18 and those entitled to institutional services; and (3) home health services for individuals entitled to nursing facility care.<sup>23</sup> Among the optional benefits states may select for medically needy eligibles is nursing home care. As part of this survey, states were asked whether they extended nursing home care to this population. Twenty-nine of the 33 states with medically needy pathways extended nursing home care to this population.

## **Benefits for Individuals Qualifying through Institutional Rules**

Medicaid covers institutional services for people who meet the state’s level-of-care criteria. These services include care in a nursing home, ICF/MR, and institution for mental disease (IMD), among others. Nursing home care includes room and board, skilled nursing care, rehabilitation, and other health and supportive services. ICF/MR services include room and board and a wide range of specialized therapeutic services to assist persons in functioning at optimal levels.<sup>24</sup> IMDs provide diagnosis and treatment or care of persons with mental diseases, including medical attention, nursing care, and related services.

States use a number of pathways to allow individuals to qualify for institutional care under Medicaid. First, states must allow individuals who qualify for Medicaid through the mandatory SSI-related pathways to access those institutional services covered under the state’s traditional benefits package if the individuals meet the state’s medically necessary criteria for that benefit. States electing to cover individuals through the 100% FPL and/or the Buy-In groups must make traditional benefits, including certain institutional care services, available to people who meet the state’s medically necessary criteria. States also have an option to extend coverage of certain institutional services, as well as other traditional benefits, to individuals who qualify for Medicaid through the Special Income Rule, and this pathway’s accompanying Miller Trusts.

## **Home and Community-Based Services (HCBS) Waivers**

States have the option of providing a narrow or comprehensive package of LTSS to a limited number of persons in home and community-based settings if they would otherwise require institutional care paid for by Medicaid. States make these packages of LTSS available to certain persons with disabilities using HCBS waivers, generally authorized under section 1915(c) of the

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<sup>23</sup> Broader requirements apply if a state has chosen to provide coverage for medically needy persons in institutions for mental disease and intermediate care facilities for the mentally retarded.

<sup>24</sup> “Active treatment” is defined by regulation as aggressive, consistent implementation of a program of specialized and generic training, treatment, health and related services directed toward acquisition of behaviors necessary for the client to function with as much self-determination and independence as possible, and the prevention or deceleration of regression or loss of optional functional status.

Social Security Act. Some states also use section 1115 waiver authority to design LTSS packages in the community following similar rules as under section 1915(c).

To qualify, a person generally must be a member of one of the following target groups who would otherwise be eligible for institutional care: the aged, persons with disabilities, persons with mental retardation or developmental disabilities, or persons with mental illness. States must apply for separate waivers to serve each of these different groups.

Services that states may choose to cover under HCBS waivers include case management; homemaker; home health aide; personal care; adult day health; habilitation; respite care; day treatment or other partial hospitalization services; psychosocial rehabilitation and clinic services for individuals with chronic mental illness; and other services requested by the state and approved by Secretary.

HCBS waiver services must meet both financial and level-of-care eligibility requirements set by state and federal law. Under HCBS waivers, states may limit coverage to those persons receiving SSI or allow persons to qualify under other groups, such as the SSI-related, 100% of FPL, Buy-In, or medically needy pathways. States also have the option of setting financial eligibility limits for income as high as 300% of SSI benefit level. Those states that use the 300% rule may also allow eligibles to establish a Miller Trust if those states do not also have medically needy programs. States also have the option of applying spousal impoverishment protections for couples when only one of the spouses requires Medicaid coverage of long-term care expenses.

Our survey questioned states about which aged and disabled eligibility groups they allow to be potentially eligible for their largest HCBS waiver and whether spousal impoverishment rules were used for eligibility determinations. States' answers are provided in the profiles below. When insufficient information was obtained from the survey, CRS reviewed the state's waiver applications to discover which eligibility groups allow for access to HCBS waivers in that state.

## **Analysis of Selected Survey Findings**

The survey looked at states' criteria for access to Medicaid for people aged 65 and over and certain people with disabilities. Questions concerning the income and asset thresholds associated with each eligibility pathway available in each state were among the many issues surveyed. In general, states' responses helped to measure the level of generosity or restrictiveness of a states' eligibility rules. States with higher income thresholds, for example, allow people with higher income levels to access Medicaid, while states with lower thresholds are more restrictive.

Although information on income thresholds is useful for comparative purposes, it does not tell the entire picture. To more accurately measure a state's generosity or restrictiveness for eligibility purposes, the wealth status of the state, the size of its population, and its demands on Medicaid enrollment should be considered. For example, a poorer state may have lower income thresholds than a richer state but have higher enrollment. Simultaneously, a richer state may have higher thresholds and have comparable, or even lower, enrollment numbers. Although an analysis of this complexity is not included in this report, **Table 1** shows state-by-state enrollment numbers for the aged and disabled. The survey was conducted in calendar year (CY) 2009; the most recent enrollment data available are for FY2008.



**Table I. Medicaid Enrollment, by State and Basis of Eligibility for Aged and Disabled,  
FY2008**  
(thousands)

State	Aged	Disabled	Total
Alabama	103	221	324
Alaska	7	16	23
Arizona	84	142	226
Arkansas	70	132	202
California	793	1,154	1,947
Colorado	55	85	140
Connecticut	66	68	134
Delaware	13	23	36
District of Columbia	10	38	48
Florida	369	560	929
Georgia	138	286	424
Hawaii	22	26	316
Idaho	16	37	53
Illinois	169	345	514
Indiana	84	158	242
Iowa	42	74	116
Kansas	36	68	104
Kentucky	72	244	316
Louisiana	110	204	314
Maine	57	59	116
Maryland	59	143	202
Massachusetts	160	502	662
Michigan	136	313	449
Minnesota	93	117	210
Mississippi	77	171	248
Missouri	92	185	277
Montana	10	20	30
Nebraska	24	36	60
Nevada	24	40	64
New Hampshire	15	24	39
New Jersey	113	199	312
New Mexico	27	69	96
New York	454	746	1,200
North Carolina	182	295	477

State	Aged	Disabled	Total
North Dakota	9	11	20
Ohio	188	362	550
Oklahoma	65	109	174
Oregon	51	86	137
Pennsylvania	234	537	771
Rhode Island	21	44	65
South Carolina	77	151	228
South Dakota	10	19	29
Tennessee	98	357	455
Texas	431	569	1,000
Utah	14	38	52
Vermont	18	24	42
Virginia	99	166	265
Washington	90	184	274
West Virginia	38	114	152
Wisconsin	136	152	288
Wyoming	6	10	16
Total	5,369 <sup>a</sup>	9,733 <sup>a</sup>	15,100

**Source:** Medicaid and CHIP Payment and Access Commission (MACPAC), *Report to Congress on Medicaid and CHIP*, Washington, DC, March 2011, Table 2.

**Notes:** Numbers reflect individuals ever enrolled during the year, even if for a single month. FY2008 unavailable for Hawaii; FY2007 shown instead.

a. Components do not sum to totals due to a small number of enrollees with unknown status.

Below, the aged and disabled are divided into two groups: (1) applicants who are non-working regardless of whether they require LTSS and (2) applicants with higher income who apply to Medicaid for LTSS and require the level-of-care offered in an institution.<sup>25</sup> The following analysis looks at the highest income thresholds available in each state for both groups. Decisions states make about these thresholds often reflect the amount of state revenue they want to dedicate toward Medicaid for aged and disabled populations in general and LTSS in particular.

**Table 2** summarizes the highest level of income, in 2009, that non-working elderly or disabled applicants could have and qualify for Medicaid by state. Specifically, it includes the upper income threshold, as a percent of the federal poverty level, for the SSI-related, 100% FPL, and medically needy pathways. (**Table 2** does not describe the upper threshold for applicants applying to Medicaid because they require LTSS. These pathways are described in **Table 3**.)

<sup>25</sup> For an analysis of income thresholds for working disabled, among other issues, see the body of work available at Mathematica Policy Research, at <http://www.mathematica-mpr.com/publications/SearchList2.aspx?jumpsrch=yes&txtSearch=buy-in>.

Thirty-one states (30 used medically needy rules and 1 used spend-down rules) had no limit on the amount of income an aged or disabled individual (or individual with high medical expenses) could have to qualify for Medicaid. In these states, applicants could access Medicaid with higher income levels than in other states. Benefit packages for those who qualify for Medicaid through the SSI-related and 100% FPL pathways are generally more comprehensive than the benefit packages offered to medically needy individuals.

Among the 21 states with income caps for the non-working elderly and disabled applicants, 4 states (Arizona, Massachusetts, Utah, and Vermont) allowed applicants to qualify with income up to 100% FPL while the remaining states set thresholds at lower levels.

**Table 2. Upper Income Threshold for Non-Working Aged and Disabled Medicaid Applicants, 2009**

State	Upper Income Threshold
Alabama	75% FPL
Alaska	61% FPL
Arizona	100% FPL
Arkansas	80% FPL or no limit under medically needy
California	100% FPL or no limit under medically needy
Colorado	75% FPL
Connecticut	93% FPL or no limit under medically needy
Delaware	75% FPL
District of Columbia	100% FPL or no limit under medically needy
Florida	88% FPL or no limit under medically needy
Georgia	75% FPL or no limit under medically needy
Hawaii	100% FPL (Aged) and 97% (Disabled) or no limit under medically needy
Idaho	75% FPL
Illinois	100% FPL or no limit under medically needy
Indiana	75% FPL or no limit under medically needy
Iowa	75% FPL or no limit under medically needy
Kansas	75% FPL or no limit under medically needy
Kentucky	75% FPL or no limit under medically needy
Louisiana	75% FPL or no limit under medically needy
Maine	100% FPL or no limit under medically needy
Maryland	75% FPL or no limit under medically needy
Massachusetts	100% FPL (Aged) or 133% FPL (blind or disabled)
Michigan	100% FPL or no limit under medically needy
Minnesota	95% FPL or no limit under medically needy
Mississippi	75% FPL
Missouri	85% FPL

State	Upper Income Threshold
Montana	75% FPL
Nebraska	100% FPL or no limit under medically needy
Nevada	75% FPL
New Hampshire	76% FPL or no limit under medically needy
New Jersey	100% FPL or no limit under medically needy
New Mexico	75% FPL
New York	75% FPL or no limit under medically needy
North Carolina	100% FPL or no limit under medically needy
North Dakota	75% FPL or no limit under medically needy
Ohio	65% FPL or no limit under medically needy
Oklahoma	100% FPL or no limit under 209(b) spend down
Oregon	75% FPL
Pennsylvania	100% FPL or no limit under medically needy
Rhode Island	100% FPL or no limit under medically needy
South Carolina	100% FPL
South Dakota	75% FPL
Tennessee	75% FPL
Texas	75% FPL
Utah	100% FPL
Vermont	100% FPL or no limit under medically needy
Virginia	80% FPL or no limit under medically needy
Washington	75% FPL or no limit under medically needy
West Virginia	75% FPL
Wisconsin	100% FPL or no limit under medically needy
Wyoming	75% FPL

**Source:** CRS Analysis of CRS/AARP State Survey, 2009.

**Notes:** Table excludes eligibility for LTSS through the Special Income Rule and the Medicaid Buy-In pathway. Table shows the maximum threshold for individuals. In 2009, the federal poverty level (100% FPL) in the lower 48 states and the District of Columbia was \$10,830 for an individual; in Hawaii, it was \$12,460; and in Alaska, it was \$13,330. See Federal Poverty Guidelines for 2009 at <http://aspe.hhs.gov/poverty/09poverty.shtml>. Under the medically needy pathway, aged or disabled individuals qualify when their medical expenses (on such things as nursing home [NH] care, prescription drugs, etc.) deplete, or “spend down,” their income and assets to specified Medicaid thresholds.

**Table 3** summarizes the upper income threshold for applicants applying to Medicaid because they require LTSS and meet the state’s criteria for institutional care. LTSS in **Table 3** is divided into two service types: nursing homes and states’ largest HCBS waivers. By showing the upper income thresholds for both service types, one can begin to evaluate the extent to which parity exists between these services. However, to fully evaluate parity, additional information is needed about the number of waiver slots a state offers compared to demand as well as the amount of income an individual is allowed to retain to pay for living expenses in a home and community-based setting (i.e., MMNA). The latter of these measures is presented in **Table 4**.

Although states have many rules for determining eligibility, 45 states had no maximum income limit for accessing nursing home care in their state (see **Table 3**). In addition, 39 states had no income limit for accessing their states' largest HCBS waiver program. In general, a state's use of either the medically needy pathway or miller trust, in conjunction with the special income rule, results in no upper income limit. This shows that at least six states (Connecticut, Louisiana, Massachusetts, Michigan, New Jersey, and Washington) allow applicants with higher income to access nursing home care, while limiting access to HCBS waiver services to individuals with lower income levels. Parity between nursing home and HCBS waivers was not as great in these states as in others.

**Table 3. Upper Income Threshold for Applicants Meeting the State's Level-of-Care Criteria for Institutional LTSS**

State	Upper Income Threshold for Nursing Home Care	Upper Income Threshold for State's Largest HCBS Waiver
Alabama	No upper limit	No upper limit
Alaska	No upper limit	No upper limit
Arizona	644% FPL in urban areas, 572% FPL in rural areas	644% FPL in urban areas, 572% FPL in rural areas
Arkansas	No upper limit	No upper limit
California	No upper limit	No upper limit
Colorado	Limit of the regional private pay rate of nursing home	Limit of the regional private pay rate of nursing home
Connecticut	No upper limit	224% FPL
Delaware	No upper limit	No upper limit
District of Columbia	No upper limit	No upper limit
Florida	No upper limit	No upper limit
Georgia	No upper limit	No upper limit
Hawaii	No upper limit	No upper limit
Idaho	No upper limit	No upper limit
Illinois	No upper limit	No upper limit
Indiana	No upper limit	No upper limit
Iowa	No upper limit	No upper limit
Kansas	No upper limit	No upper limit
Kentucky	No upper limit	No upper limit
Louisiana	No upper limit	224% FPL
Maine	No upper limit	No upper limit
Maryland	No upper limit	No upper limit
Massachusetts	No upper limit	224% FPL
Michigan	No upper limit	100% FPL
Minnesota	No upper limit	No upper limit
Mississippi	No upper limit	No upper limit

State	Upper Income Threshold for Nursing Home Care	Upper Income Threshold for State's Largest HCBS Waiver
Missouri	85% FPL	85% FPL
Montana	No upper limit	No upper limit
Nebraska	No upper limit	No upper limit
Nevada	No upper limit	No upper limit
New Hampshire	No upper limit	No upper limit
New Jersey	No upper limit	224% FPL
New Mexico	No upper limit	No upper limit
New York	No upper limit	No upper limit
North Carolina	No upper limit	No upper limit
North Dakota	No upper limit	No upper limit
Ohio	No upper limit	No upper limit
Oklahoma	332% FPL	332% FPL
Oregon	720% FPL	720% FPL
Pennsylvania	No upper limit	No upper limit
Rhode Island	No upper limit	No upper limit
South Carolina	No upper limit	No upper limit
South Dakota	No upper limit	No upper limit
Tennessee	No upper limit	No upper limit
Texas	No upper limit	No upper limit
Utah	No upper limit	No upper limit
Vermont	No upper limit	No upper limit
Virginia	No upper limit	No upper limit
Washington	No upper limit	224% FPL
West Virginia	224% FPL	224% FPL
Wisconsin	No upper limit	No upper limit
Wyoming	No upper limit	No upper limit

**Source:** CRS Analysis of CRS/AARP State Survey, 2009.

**Notes:** Table shows the maximum threshold for individuals. In 2009, the federal poverty level (100% FPL) in the lower 48 states and the District of Columbia was \$10,830 for an individual; in Hawaii, it was \$12,460; and in Alaska, it was \$13,330. See Federal Poverty Guidelines for 2009 at <http://aspe.hhs.gov/poverty/09poverty.shtml>. States with no upper income limit either use the medically needy pathway, in which medical expenses (on such things as nursing home [NH] care, prescription drugs, etc.) deplete, or “spend down,” income and assets to specified Medicaid thresholds, or the special income rule with a Miller Trust, for eligibility purposes.

**Table 4** shows each state’s monthly maintenance of need allowance (MMNA). The MMNA is the maximum amount of income an individual enrolled in the state’s HCBS waiver program may retain for living expenses; amounts above the MMNA are applied toward the cost of the

beneficiary’s care. Waiver enrollees use these funds to pay for living expenses, including housing, food, transportation, clothing, personal care products, among others.<sup>26</sup>

Higher MMNAs allow Medicaid beneficiaries more income to live in their homes or community setting while accessing Medicaid. Lower MMNAs leave individuals less income to reside in home and community-based settings, increasing the likelihood that individuals will seek institutional care to meet their LTSS and housing needs. Fifteen states have MMNAs of less than \$1,000 for all or some beneficiaries, while the remainder of states have MMNAs of higher than \$1,000. Although the information provided in **Table 4** is useful for comparative purposes, it is not adjusted for differences in the cost of living across states.

**Table 4. Monthly Maintenance of Need Allowance (MMNA) for Enrollees in Home and Community-Based Waiver Services**

State	Maintenance Needs Allowance
Alabama	\$1,658
Alaska	\$1,656, or unlimited with a Miller Trust
Arizona	\$2,022, or \$5,808 with a Miller Trust
Arkansas	\$2,022, or unlimited with a Miller Trust <sup>a</sup>
California	\$600 for an individual, \$934 for a couple <sup>a</sup>
Colorado	\$2,022, or unlimited with a Miller Trust <sup>a</sup>
Connecticut	\$1,806
Delaware	\$1,685, or unlimited with a Miller Trust
District of Columbia	\$2,022
Florida	\$674, or unlimited with a Miller Trust <sup>a</sup>
Georgia	\$674, or unlimited with a Miller Trust
Hawaii	At Home = \$1,038, At Care Facility = \$674 <sup>a</sup>
Idaho	\$1,011 (w/mortgage or rent), \$674 (w/no mortgage or rent), or unlimited with a Miller Trust <sup>a</sup>
Illinois	\$674 <sup>a</sup>
Indiana	\$2,022, or unlimited with a Miller Trust
Iowa	\$2,022, or unlimited with a Miller Trust
Kansas	\$727 <sup>a</sup>
Kentucky	\$694, or unlimited with a Miller Trust
Louisiana	\$2,022
Maine	\$1,129
Maryland	\$2,022
Massachusetts	\$2,022 <sup>a</sup>

<sup>26</sup> Room and board, food, and some personal care products, among others, are provided to nursing home beneficiaries by Medicaid.

<b>State</b>	<b>Maintenance Needs Allowance</b>
Michigan	\$2,022 <sup>a</sup>
Minnesota	\$935
Mississippi	\$2,022, or unlimited with a Miller Trust
Missouri	\$2,022 <sup>a</sup>
Montana	\$674 (Categorically Needy), \$625 (Medically Needy)
Nebraska	\$903 <sup>a</sup>
Nevada	\$2,022, or unlimited with a Miller Trust <sup>a</sup>
New Hampshire	\$2,022
New Jersey	\$674 for residents in Assisted Living Facilities, \$2,022 for all others <sup>a</sup>
New Mexico	\$2,022, or unlimited with a Miller Trust <sup>a</sup>
New York	\$787
North Carolina	\$903
North Dakota	\$750
Ohio	\$1,314
Oklahoma	\$1,011, or \$3,000 with a Miller Trust
Oregon	\$1,822, or \$6,494 with a Miller Trust
Pennsylvania	\$2,022
Rhode Island	\$923
South Carolina	Not available
South Dakota	\$694, or unlimited with a Miller Trust <sup>a</sup>
Tennessee	\$1,348, or unlimited with a Miller Trust
Texas	\$2,022, or unlimited with a Miller Trust
Utah	\$903
Vermont	\$991
Virginia	\$2,022
Washington	\$903
West Virginia	\$2,022 <sup>b</sup>
Wisconsin	\$2,022
Wyoming	\$2,022, or unlimited with a Miller Trust <sup>a</sup>

**Source:** CRS Analysis of CRS/AARP State Survey, 2009.

- a. Information collected per telephone, e-mail, or contact with the state's Medicaid office.
- b. Information collected from the state's section 1915(c) waiver application.



## **State Profiles**

The following tables and subsequent state profiles show the eligibility groups and other rules states selected for calendar year 2009.

## Alabama

**Table 5. Eligibility Pathways for Medicaid and Long-Term Care in Alabama, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** State website, [http://www.medicaid.alabama.gov/CONTENT/3.0\\_apply/3.2\\_Qualifying\\_for\\_Medicaid.aspx](http://www.medicaid.alabama.gov/CONTENT/3.0_apply/3.2_Qualifying_for_Medicaid.aspx), and waiver application.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### **Institutional LTC**

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$1,822 in income and between \$25,000 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly, with an additional \$90 monthly supplement for veterans or widows of a veteran.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state does not apply spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,658 in an MMNA.

### **Other**

The Katie Beckett pathway is not available. The hospice only pathway is not available.

## Alaska

**Table 6. Eligibility Pathways for Medicaid and Long-Term Care in Alaska, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,819 (includes spousal income) <sup>a</sup>	\$10,000 / \$15,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$1,656 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Unearned income must be at or below \$1,156 per month.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available to individuals who have lived in an institution for at least 30 days. The state makes the special income rule pathway available up to 246% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$75 monthly or \$90 monthly for veterans in LTC facilities.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,656 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Arizona

**Table 7. Eligibility Pathways for Medicaid and Long-Term Care in Arizona, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	No
Buy-In	\$2,257 (excluding spousal income)	No Resource Limit	Yes	Yes	No
Special Income Rule, Miller Trust	\$2,022, \$5,808 cap in urban areas, \$5,158 cap in rural areas	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust may not exceed \$5,808 in urban areas and \$5,158 in rural areas.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$101 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Arkansas

**Table 8. Eligibility Pathways for Medicaid and Long-Term Care in Arkansas, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
100% FPL	\$722 / \$971	\$2,000 / \$3,000	Yes	Yes	No
Buy-In	\$2,257 (excludes spousal income) <sup>a</sup>	\$4,000 / \$6,000	Yes	Yes	No
Medically Needy (MN)	\$108 / \$217	\$2,000 / \$3,000	MN benefits only <sup>b</sup>	No (NH care) <sup>c</sup>	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. Net personal income (earned plus unearned, after SSI income exclusions); unearned income must be less than SSI threshold plus \$20.
- b. The type, amount and scope of benefits offered to the medically needy population may be less than under traditional benefit packages.
- c. The state does not extend nursing home care to eligible medically needy individuals. Our survey did not ask whether states extend other institutional services to these individuals.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 80% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a three month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,822 and \$2,739 in income and \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the special income pathway. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in a monthly maintenance needs allowance (MMNA), or an unlimited amount with a Miller Trust.

**Other Pathways**

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## California

**Table 9. Eligibility Pathways for Medicaid and Long-Term Care in California, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (includes spousal income) <sup>a</sup>	\$2,000 / \$3,000	Yes	Yes	No
Medically Needy (MN)	\$600 / \$934	\$2,000 / \$3,000	MN benefits only <sup>b</sup>	Yes (NH care) <sup>c</sup>	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. Excludes disability-related income including SSDI benefits.
- b. The type, amount and scope of benefits offered to the medically needy population may be less than under traditional benefit packages.
- c. The state extends nursing home care to eligible medically needy individuals. Our survey did not ask whether states extend other institutional services to these individuals.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related, 100% FPL, medically needy, and Buy-In pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$35 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Individual waiver recipients may retain up to \$600 in an MMNA. Couples that are both waiver recipients may retain up to \$934 in an MMNA.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Colorado

**Table 10. Eligibility Pathways for Medicaid and Long-Term Care in Colorado, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022, regional private pay rate cap	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are capped by region.

### Institutional LTC

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly for SSI recipients and higher for certain others with non-service connected disabilities.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.



## Connecticut

**Table 11. Eligibility Pathways for Medicaid and Long-Term Care in Connecticut, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related: 209(b)	\$842 / \$1,286	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$75,000 per year (excludes spousal income)	\$10,000 / \$15,000	Yes	Yes	No
Medically Needy (MN)	\$611 / \$778	\$1,600 / \$2,400	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

Connecticut is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related 209(b), Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$69 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b) and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,806 in an MMNA.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Delaware

**Table 12. Eligibility Pathways for Medicaid and Long-Term Care in Delaware, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
Special Income Rule, Miller Trust	\$1,685 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### **Institutional LTC**

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$25,000 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$44 monthly.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the special income pathway. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,685 in an MMNA or higher with a Miller Trust.

### **Other**

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## District of Columbia

**Table 13. Eligibility Pathways for Medicaid and Long-Term Care in the District of Columbia, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$577 / \$607	\$4,000 / \$6,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

Source: CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses to the state's medically needy threshold from a selected budget period between one and six months. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$70 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Florida

**Table 14. Eligibility Pathways for Medicaid and Long-Term Care in Florida, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$794 / \$1,068	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$180 / \$241	\$5,000 / \$6,000	MN benefits only	No	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 88% of the FPL. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### **Institutional LTC**

The SSI-related, 100% FPL, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$35 monthly.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain an unlimited amount for an MMNA.

### **Other Pathways**

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Georgia

**Table 15. Eligibility Pathways for Medicaid and Long-Term Care in Georgia, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$317 / \$375	\$2,000 / \$3,000	MN benefits only	No (NH care)	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state’s medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$674 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## Hawaii

**Table 16. Eligibility Pathways for Medicaid and Long-Term Care in Hawaii, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$1,039 / \$1,397 (Aged) \$674 / \$1,011 (Disabled)	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$469 / \$632	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes

Source: CRS/AARP State Survey, 2009.

### Traditional Benefits

Hawaii is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related: 209(b), 100% FPL, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b), 100% FPL and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$674 in an MMNA if they live in a residential care facility. All other waiver recipients may retain up to \$1,038 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Idaho

**Table 17. Eligibility Pathways for Medicaid and Long-Term Care in Idaho, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	Less than or equal to \$4,513 <sup>a</sup>	\$10,000 (includes spousal resources)	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Excludes retirement accounts, life insurance; earned income >15% of total earned and unearned.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### **Institutional LTC**

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,821 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients with a mortgage or rent may retain up to \$1,011 in an MMNA. Waiver recipients with no mortgage or rent may retain up to \$674 in an MMNA.

### **Other**

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## Illinois

**Table 18. Eligibility Pathways for Medicaid and Long-Term Care in Illinois, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$1,806 (includes spousal income) <sup>a</sup>	\$10,000 (includes spousal resources) <sup>b</sup>	Yes	Yes	No
Medically Needy (MN)	\$903 / \$1,214	\$2,000 / \$3,000	MN benefits only	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Increased to \$3,160 in February 2009.

b. Increased to \$25,000 and exempts retirement and medical savings accounts.

### Traditional Benefits

Illinois is a 209(b) state and applies more restrictive rules to the counting of income and resources and the definition of disability than are applied under the federal government's SSI thresholds. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related: 209(b), 100% FPL, Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b), 100% FPL applicants. Waiver recipients may retain up to \$674 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.



## Indiana

**Table 19. Eligibility Pathways for Medicaid and Long-Term Care in Indiana, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
Buy-In	\$3,160 (excludes spousal income)	\$2,000 (excludes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$674 / \$1,011	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	No	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

Indiana is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related: 209(b), Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$52 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Iowa

**Table 20. Eligibility Pathways for Medicaid and Long-Term Care in Iowa, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (includes spousal income)	\$12,000 / \$13,000	Yes	Yes	No
Medically Needy (MN)	\$483	\$10,000	MN benefits only	No (NH care)	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a two month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Kansas

**Table 21. Eligibility Pathways for Medicaid and Long-Term Care in Kansas, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,709 (includes spousal income)	\$15,000 (includes spousal resources)	Yes	Yes	No
Medically Needy (MN)	\$475	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$62 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$727 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Kentucky

**Table 22. Eligibility Pathways for Medicaid and Long-Term Care in Kentucky, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
Medically Needy (MN)	\$217 / \$267	\$2,000 / \$4,000	MN benefits only	Yes (NH care)	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses to the state's medically needy threshold from a selected budget period between one and three months. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,822 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the special income pathway. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$694 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## Louisiana

**Table 23. Eligibility Pathways for Medicaid and Long-Term Care in Louisiana, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$677 / \$911	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (excludes spousal income)	\$25,000 (excludes spousal resources)	Yes	Yes	No
Medically Needy (MN)	\$100 / \$192	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 75% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a three month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$38 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Maine

**Table 24. Eligibility Pathways for Medicaid and Long-Term Care in Maine, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (on total income) <sup>a</sup>	\$12,000 (includes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$903 / \$1,214	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Up to \$903 on unearned income (includes spousal income).

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,129 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Maryland

**Table 25. Eligibility Pathways for Medicaid and Long-Term Care in Maryland, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,709 (includes spousal income)	\$10,000 (includes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$350 / \$392	\$2,500 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$71 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Massachusetts

**Table 26. Eligibility Pathways for Medicaid and Long-Term Care in Massachusetts, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	No Income Limit	No Resource Limit	Yes	Yes	No
Medically Needy (MN)	\$522/ \$650	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	No	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

**Notes:** 100% of FPL Pathway disregards 33% of income above 100% of the FPL if the beneficiary is blind or disabled.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$73 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL and special income pathways. The state does not apply spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.



## Michigan

**Table 27. Eligibility Pathways for Medicaid and Long-Term Care in Michigan, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$903 <sup>a</sup>	\$75,000 (excludes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$903 / \$1,215	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	No

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. Pre-enrollment: Total countable income (earned and unearned) cannot exceed \$903 using SSI methodology. During enrollment: No limit on earned income, but unearned income cannot exceed \$903. (Excludes spousal income)

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$60 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the 100% FPL and Buy-In pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## Minnesota

**Table 28. Eligibility Pathways for Medicaid and Long-Term Care in Minnesota, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$482 / \$602	\$2,000 / \$3,000	Yes	Yes	No
100% FPL	\$858/ \$1,153	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	No maximum. Lower limit of \$65 of unearned income (excludes spousal income)	\$20,000 (excludes spousal resources)	Yes	Yes	No
Medically Needy (MN)	\$467 / \$583	\$3,000 / \$6,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Aged only

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

Minnesota is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related: 209(b), 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,823 and \$2,739 in income and between \$31,094 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$89 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the 100% FPL, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$935 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Mississippi

**Table 29. Eligibility Pathways for Medicaid and Long-Term Care in Mississippi, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

Source: CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$44 monthly. This amount can increase if the beneficiary participates in a work therapy program.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Missouri

**Table 30. Eligibility Pathways for Medicaid and Long-Term Care in Missouri, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$768 / \$1,033 <sup>a</sup>	\$2,000 / \$3,000 <sup>b</sup>	Yes	Yes	Yes
100% FPL	\$767 / \$1,032	\$2,000 / \$3,000	Yes	Yes	No

**Source:** CRS/AARP State Survey, 2009.

**Note:** State-reported survey data shows an inconsistency about whether Missouri offers the Special Income Rule pathway.

- a. For the blind and/or, disabled, the income threshold is \$903 for an individual and \$1,215 for a couple.
- b. For the blind and/or disabled, the resource amount for a couple is \$4,000.

### Traditional Benefits

Missouri is a 209(b) state and applies more restrictive rules to the definition of disability than are applied under the federal government's SSI thresholds. The 100% FPL pathway is available to individuals with incomes up to 85% of the FPL.

### Institutional LTC

The SSI-related: 209(b) and 100% FPL pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,822 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b) pathway. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Montana

**Table 31. Eligibility Pathways for Medicaid and Long-Term Care in Montana, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$625	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes

**Source:** CRS/AARP State Survey, 2009.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### **Institutional LTC**

The SSI-related and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,821 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the SSI-related and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Medically needy waiver recipients may retain up to \$625 in an MMNA; other waiver recipients may retain \$674.

### **Other Pathways**

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Nebraska

**Table 32. Eligibility Pathways for Medicaid and Long-Term Care in Nebraska, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$903	\$4,000 / \$6,000	Yes	Yes	No
Medically Needy (MN)	\$903 / \$1,215	\$4,000 / \$6,000	MN benefits only	Yes (NH care)	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$903 in an MMNA.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Nevada

**Table 33. Eligibility Pathways for Medicaid and Long-Term Care in Nevada, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (earned income) <sup>a</sup>	\$15,000 (excludes spousal resources)	Yes	Yes	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Unearned income is capped at \$699.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$35 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## New Hampshire

**Table 34. Eligibility Pathways for Medicaid and Long-Term Care in New Hampshire, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$688 / \$1,012	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$4,063 (earned income, includes spousal income)	\$24,991 / \$37,487	Yes	Yes	Yes
Medically Needy (MN)	\$591 / \$675	\$2,500 / \$4,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

New Hampshire is a 209(b) state and applies more restrictive rules to the definition of disability than are applied under the federal government’s SSI thresholds. Individuals with disabilities may qualify under the state’s Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month or six month budget period to the state’s medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related: 209(b), Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$56 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b), Buy-In, medically needy, and special income pathways. The state does not apply spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.



## New Jersey

**Table 35. Eligibility Pathways for Medicaid and Long-Term Care in New Jersey, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	No
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	No
Buy-In	\$2,257 earned income, \$903 unearned income <sup>a</sup>	\$20,000 (excludes spousal resources)	Yes	Yes	No
Medically Needy (MN)	\$367 / \$434	\$4,000 / \$6,000	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. Unearned income threshold disregards SSDI benefits received under individual's account (SSN, not survivor's SSN).

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$35 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the special income pathway. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients in an alternative living facility may retain up to \$674 in an MMNA. All other waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## New Mexico

**Table 36. Eligibility Pathways for Medicaid and Long-Term Care in New Mexico, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 earned income, <sup>a</sup> \$1,226 unearned income (includes spousal income)	\$10,000 (excludes spousal resources)	Yes	Yes	No
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. To be eligible for Medicaid Buy-In in New Mexico beneficiaries must earn at least \$970 over three months.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Working individuals with disabilities may also qualify for Medicaid state plan services through the state's Buy-In pathway. The state makes the special income rule pathway available to individuals who have been in an institution for at least 30 days. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$1,822 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$63 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## New York

**Table 37. Eligibility Pathways for Medicaid and Long-Term Care in New York, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit</b> (Individual/Couple)	<b>Total Resources Limit</b> (Individual/Couple)	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257	\$13,800 / \$20,100	Yes	Yes	Yes
Medically Needy (MN)	\$767 / \$1,117	\$13,800 / \$20,100	MN benefits only	Yes (NH care)	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010. Additional information was obtained from, [http://www.health.state.ny.us/health\\_care/medicaid/program/buy\\_in/index.htm](http://www.health.state.ny.us/health_care/medicaid/program/buy_in/index.htm) State Plan.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related, Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$74,820 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state does not apply spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$787 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## North Carolina

**Table 38. Eligibility Pathways for Medicaid and Long-Term Care in North Carolina, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$3,612 (excludes spousal income) <sup>a</sup>	\$20,880 (includes spousal resources)	Yes	Yes	No
Medically Needy (MN)	\$242 / \$317	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Phased implementation open to individuals with monthly incomes up to \$1,354 in December 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$903 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## North Dakota

**Table 39. Eligibility Pathways for Medicaid and Long-Term Care in North Dakota, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$750 / \$1,008	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,031 (excludes spousal income)	\$13,000 (includes family income)	Yes	Yes	Yes
Medically Needy (MN)	\$750 / \$1,008	\$3,000 / \$6,000	MN benefits	Yes (NH care)	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

North Dakota is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold.

### Institutional LTC

The SSI-related: 209(b), Buy-In, and medically needy pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,267 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b), Buy-In, and medically needy pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$750 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Ohio

**Table 40. Eligibility Pathways for Medicaid and Long-Term Care in Ohio, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$589 / \$1,011	\$1,011 / \$2,250	Yes	Yes	Yes
Buy-In	\$2,257 (excludes spousal income) <sup>a</sup>	\$10,580 (includes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$589 / \$1,011	\$1,011 / \$2,250	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$1,011 / \$2,250	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Persons with a severe work disability are given an unearned income disregard of up to \$20,000 per year.

### Traditional Benefits

Ohio is a 209(b) state and applies more restrictive rules to the counting of income and resources than are applied under the federal government's SSI thresholds. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related: 209(b), Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b), Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,314 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Oklahoma

**Table 41. Eligibility Pathways for Medicaid and Long-Term Care in Oklahoma, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$716 / \$1,054, if one spouse is ineligible (\$1,094 if both spouses are eligible)	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	No
Special Income Rule, Miller Trust	\$2,022, \$3,000 cap	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### Traditional Benefits

Oklahoma is a 209(b) state and applies more restrictive rules to the counting of resources than is applied under the federal government's SSI threshold. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL in Oklahoma. The state makes the special income rule pathway available up to 300% of SSI. No more than \$3,000 can be deposited in a Miller Trust.

### Institutional LTC

The SSI-related: 209(b), 100% FPL, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$25,000 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related: 209(b) and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,011 in an MMNA or up to \$3,000 with a Miller Trust.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Oregon

**Table 42. Eligibility Pathways for Medicaid and Long-Term Care in Oregon, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 adjusted earned income (excludes spousal income)	\$5,000 (excludes spousal resources)	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022, or \$6,494 cap	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI. Up to \$6,494 can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$1,822 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,822 in an MMNA or \$6,494 with a Miller Trust.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.



## Pennsylvania

**Table 43. Eligibility Pathways for Medicaid and Long-Term Care in Pennsylvania, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (includes spousal income)	\$10,000 (includes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$2,550 / \$2,650 <sup>a</sup>	\$2,400 / \$3,200	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010. Pennsylvania 1915(c) waiver application, [http://www.temple.edu/thetrainingpartnership/resources/mrBulletins/wv/00-09-04\\_attch2.pdf](http://www.temple.edu/thetrainingpartnership/resources/mrBulletins/wv/00-09-04_attch2.pdf)

a. Income threshold evaluated across six months.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$45 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Rhode Island

**Table 44. Eligibility Pathways for Medicaid and Long-Term Care in Rhode Island, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (excludes spousal income)	\$10,000 / \$20,000	Yes	Yes	No
Medically Needy (MN)	\$800 / \$842	\$4,000 / \$6,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$923 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## South Carolina

**Table 45. Eligibility Pathways for Medicaid and Long-Term Care in South Carolina, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

Source: CRS/AARP State Survey, 2009.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, 100% FPL, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and between \$66,480 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$30 monthly.<sup>27</sup>

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. MMNA was not available through survey or state contacts.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

<sup>27</sup> <http://www.dhhs.state.sc.us/dhhsnew/insidedhhs/bureaus/bureauofeligibilityprocessing/nursinghome.asp>

## South Dakota

**Table 46. Eligibility Pathways for Medicaid and Long-Term Care in South Dakota, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (excludes spousal income)	\$8,000 (excludes spousal resources)	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$1,821 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$60 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$694 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Tennessee

**Table 47. Eligibility Pathways for Medicaid and Long-Term Care in Tennessee, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009.

### **Traditional Benefits**

All SSI recipients are eligible for Medicaid. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### **Institutional LTC**

The SSI-related and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50.

### **HCBS Waiver**

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$1,348 in an MMNA or higher with a Miller Trust.

### **Other**

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Texas

**Table 48. Eligibility Pathways for Medicaid and Long-Term Care in Texas, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (excludes spousal income) <sup>a</sup>	\$5,000 (excludes spousal resources) <sup>b</sup>	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010. Texas section 1915(c) waiver application, <http://www.dads.state.tx.us/providers/CBA/CBAWaiver.pdf>

- a. To be eligible for Medicaid Buy-In in Texas beneficiaries must earn at least \$1,090 in qualifying SSA quarter prior to application date.
- b. Half of any jointly owned (with spouse) assets considered.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available to individuals who have been in an institution for at least 30 days. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$60 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Utah

**Table 49. Eligibility Pathways for Medicaid and Long-Term Care in Utah, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 (includes spousal income)	\$15,000 (includes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$903 / \$1,214	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a one month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,822 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$45 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$903 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is not available.

## Vermont

**Table 50. Eligibility Pathways for Medicaid and Long-Term Care in Vermont, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 <sup>a</sup>	\$5,000 / \$6,000	Yes	Yes	No
Medically Needy (MN)	\$991	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. After disregarding SSDI and veteran's benefits, income cannot exceed either the Medicaid protected income level for one, or the SSI/Aid to the Aged, Blind, and Disabled (AABD) payment level for two.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses living in an LTC facility can spend down their income on medical expenses over a one-month budget period (six-month, if living in the community) to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$1,829 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$47 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$991 in an MMNA.

### Other

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.



## Virginia

**Table 51. Eligibility Pathways for Medicaid and Long-Term Care in Virginia, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related: 209(b)	\$722 / \$972	\$2,000 / \$3,000	Yes	Yes	No
100% FPL	\$722 / \$971	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$722 (includes spousal income)	\$2,000 / \$3,000	Yes	Yes	Yes
Medically Needy (MN)	\$421 / \$508	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

Virginia is a 209(b) state and applies more restrictive rules to the counting of resources than is applied under the federal government's SSI thresholds. The 100% FPL pathway is available to individuals with incomes up to 80% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related: 209(b), 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$40 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the 100% FPL, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## Washington

**Table 52. Eligibility Pathways for Medicaid and Long-Term Care in Washington, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$1,987 (includes spousal income)	No Resource Limit	Yes	Yes	Yes
Medically Needy (MN)	\$467 / \$592	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a budget period to the state's medically needy threshold. The beneficiary's budget period may have a retroactive base period that is one, two, or three months depending on the client's circumstances and eligibility. The prospective base period may be either three or six months and is the beneficiary's option. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain between \$1,821 and \$2,739 in income and between \$48,639 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$70 monthly for institutionalized persons.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$903 in an MMNA.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## West Virginia

**Table 53. Eligibility Pathways for Medicaid and Long-Term Care in West Virginia, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,257 <sup>a</sup>	\$2,000 <sup>b</sup>	Yes	Yes	No
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

- a. Unearned income must be equal to or less than the SSI benefit plus \$20.
- b. Liquid assets are excluded up to \$5,000.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain between \$1,821 and \$2,739 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related and special income pathways. The state does not apply spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is not available.

## Wisconsin

**Table 54. Eligibility Pathways for Medicaid and Long-Term Care in Wisconsin, 2009**

<b>Eligibility Pathway</b>	<b>Monthly Income Limit (Individual/Couple)</b>	<b>Total Resources Limit (Individual/Couple)</b>	<b>Traditional Benefits</b>	<b>Institutional LTC</b>	<b>HCBS Waivers</b>
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
100% FPL	\$903 / \$1,214	\$2,000 / \$3,000	No	Yes	Yes
Buy-In	\$2,257 (includes spousal income)	\$15,000 (excludes spousal resources)	Yes	Yes	Yes
Medically Needy (MN)	\$592	\$2,000 / \$3,000	MN benefits only	Yes (NH care)	Yes
Special Income Rule	\$2,022	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. The 100% FPL pathway is available to individuals with incomes up to 100% of the FPL. Individuals with disabilities may qualify under the state's Buy-In pathway. Under the medically needy pathway, certain individuals with high medical expenses can spend down their income on medical expenses over a six month budget period to the state's medically needy threshold. The state makes the special income rule pathway available up to 300% of SSI.

### Institutional LTC

The SSI-related, 100% FPL, Buy-In, medically needy, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment rules, the community spouse may retain up to \$2,428 in income and between \$21,912 and \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$45 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, 100% FPL, Buy-In, medically needy, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA.

### Other Pathways

The Katie Beckett pathway is available. The hospice only eligibility pathway is available.

## Wyoming

**Table 55. Eligibility Pathways for Medicaid and Long-Term Care in Wyoming, 2009**

Eligibility Pathway	Monthly Income Limit (Individual/Couple)	Total Resources Limit (Individual/Couple)	Traditional Benefits	Institutional LTC	HCBS Waivers
SSI-related	\$674 / \$1,011	\$2,000 / \$3,000	Yes	Yes	Yes
Buy-In	\$2,022 <sup>a</sup>	No Resource Limit	Yes	Yes	Yes
Special Income Rule, Miller Trust	\$2,022 (no cap)	\$2,000 / \$3,000	Yes	Yes	Yes

**Source:** CRS/AARP State Survey, 2009. Buy-In Pathway Data for 2009: Matthew Kehn, Sarah Croake, and Jody Schimmel, *A Government Performance and Results Act (GPRA) Report: The Status of the Medicaid Infrastructure*, Mathematica Policy Research, Inc., Final Report, Washington, DC, December 23, 2010.

a. Gross countable income only.

### Traditional Benefits

All SSI recipients are eligible for Medicaid. Individuals with disabilities may qualify under the state's Buy-In pathway. The state makes the special income rule pathway available to individuals who have been in an institution for at least 30 days. The state makes the special income rule pathway available up to 300% of SSI. Amounts that can be deposited in a Miller Trust are unlimited.

### Institutional LTC

The SSI-related, Buy-In, and special income rule pathways are available to individuals to qualify for institutional LTC. Under spousal impoverishment, the community spouse may retain up to \$2,739 in income and up to \$109,560 in assets. The personal needs allowance for an individual in an LTC facility is \$50 monthly.

### HCBS Waiver

For HCBS waiver services, individuals can qualify through the SSI-related, Buy-In, and special income pathways. The state applies spousal impoverishment rules to HCBS waiver applicants. Waiver recipients may retain up to \$2,022 in an MMNA or higher with a Miller Trust.

### Other

The Katie Beckett pathway is not available. The hospice only eligibility pathway is available.

## **Appendix A. Eligibility Groups Excluded from the Survey**

Not all of Medicaid's eligibility groups, or pathways, for these populations were surveyed, in part because (1) one group was recently established, (2) information on these groups are available through other sources, and/or (3) some groups do not bring in significant numbers of eligibles.

Among the eligibility pathways not included in our survey are the pathways for dual eligibles (i.e., those eligible for both Medicare and Medicaid). Also not included is the new pathway established under the Patient Protection and Affordable Care Act (PPACA; P.L. 111-148). Section 2402 of PPACA gave states the option to extend certain home and community-based services (HCBS), as well as full Medicaid, to individuals with income no greater than 150% of the federal poverty level (FPL) and who meet a state's needs-based criteria. This needs-based criteria, defined by states, can be no more stringent than the criteria the state uses to determine eligibility for institutional care in a nursing facility, ICF/MR, or hospital. Alternatively, states may choose to extend this eligibility pathway to persons with income up to 300% of the SSI benefit rate who are receiving HCBS services under a waiver authorized under sections 1915(c), (d) or (e) of the SSA.

Also not included is the optional Medicaid eligibility group for families who have children with disabilities, known as the Family Opportunity Act (FOA). FOA was established by the Deficit Reduction Act of 2005 (DRA, P.L. 109-171). As of January 1, 2007, states have the option to allow families whose income is less than 300% of FPL to purchase Medicaid coverage for their disabled children through age 18. This Medicaid buy-in can cover all disabled children up to age 18. FOA has some restrictions, such as states must require working parents to enroll in and pay premiums for family coverage through employer-sponsored insurance, when it is offered. States also can require families to pay a portion of the cost of their children's participation in Medicaid through monthly premiums using a sliding scale based on income, (i.e., families with income up to 200% of the FPL would be responsible for payments of 5% of income, and 7.5% of income for families with income between 200% and 300% of FPL).

## **Appendix B. Medicaid's Resources Rules for Aged and Disabled Eligibility Pathways**

SSI, and thus Medicaid, limits the countable resources persons may have to qualify for benefits. Countable resources generally refer to liquid assets, such as money in bank accounts, stocks and bonds, mutual fund investments, and certificates of deposit. In general, an SSI recipient can have assets, with the exception of a home, car, and household items, worth no more than \$2,000; beneficiary-couples can have countable assets worth no more than \$3,000. Eligibility for SSI is restricted to otherwise qualifying individuals whose resources do not exceed \$2,000 for an individual and \$3,000 for a couple.

Countable resources do not, however, include all resources that an individual or couple may own. They exclude, but are not limited to, a car used for essential transportation (or, if not essential, up to \$4,500 of its current value), property essential to income-producing activity, household goods and personal effects totaling \$2,000 or less, and life insurance policies with a combined face value of \$1,500 or less.<sup>28</sup>

Under SSI, the entire value of the primary place of residence (i.e., his or her home) of Medicaid applicants is not counted. However, the Deficit Reduction Act of 2005 (DRA) amended Medicaid law (section 1917 of the Social Security Act) to restrict eligibility for Medicaid to certain individuals who apply for Medicaid coverage for nursing facility or other LTSS if the applicant's equity interest in his or her home is greater than \$500,000.<sup>29</sup> A state may elect to substitute an amount that exceeds \$500,000 but does not exceed \$750,000.<sup>30</sup> This restriction applies only to applicants who do not have a spouse, child under age 21, or child who is blind or disabled (as defined by the section 1614(a)(3) of the Social Security Act for the 50 states and the District of Columbia) lawfully residing in the home.<sup>31</sup>

For purposes of qualifying for Medicaid, people who have home equity above the state-specified amount must reduce their total equity interest in the home. The income earned from a transaction, such as a reverse mortgage or home equity loan, is subject to repayment. It is not considered countable income for Medicaid eligibility purposes in the month it is received. Any amounts retained into the following month are counted as resources and would need to be depleted to the state's asset thresholds before the individual could qualify for Medicaid.<sup>32</sup> A process exists for waiving the application of the home equity limit in the case of demonstrated hardship.

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<sup>28</sup> The SSI resource exclusions can be found in section 1613 of the Social Security Act (42 USC § 1382b) and in the Code of Federal Regulations at 20 CFR §§ 416.1210-416.1239.

<sup>29</sup> Applies when applicants seek Medicaid coverage for the following services: nursing facility care; a level of care in any institution equivalent to nursing facility services; HCBS furnished under a waiver under sections 1915(c) or (d) of the Social Security Act; and services provided to a noninstitutionalized individual that are described in paragraph (7), (22), or (24) of section 1905(a) of the act, among other instances.

<sup>30</sup> Beginning in 2011, these dollar amounts are increased from year to year based on the percentage increase in the consumer price index for all urban consumers, rounded to the nearest \$1,000.

<sup>31</sup> And who are determined eligible for certain long-term care services based on an application filed on or after January 1, 2006.

<sup>32</sup> SSR 92-8p: Policy Interpretation Ruling Title XVI: SSI Loan Policy, Including its Applicability to Advances of Food and/or Shelter.

For any beneficiary (and spouse, if any) who moves out of his or her home without the intent to return, the home becomes a countable resource because it is no longer the individual's principal place of residence. If an individual leaves his or her home to live in an institution, the home is still considered to be the individual's principal place of residence, irrespective of the individual's intent to return, as long as a spouse or dependent relative of the eligible individual continues to live there.

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