



AGED, BLIND and DISABLED MEDICAID 012

TABLE OF STANDARDS

Nursing Home Residents - Income

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| | ABD 012 |
| Supersedes: | MA 005 (07/01/15) |
| References: | ARM 37.82.101, .1313, .1320, .1330, .1331, .1336-.1338 |
| Overview: | <p><u>GENERAL RULE</u> - Use the following standards to determine eligibility and category of coverage (categorically versus medically needy) for residential medical institution Medicaid benefits.</p> <p>Otherwise eligible institutionalized individuals and spouses are income- eligible for nursing home coverage so long as their monthly nursing home costs equal or exceed their monthly income.</p> <p>After a nursing home resident has been determined eligible for nursing home coverage as either categorically or medically needy, the amount the client is responsible to apply toward the cost of care must be calculated in STEP II of the eligibility process.</p> |
| CATEGORICALLY NEEDY INCOME STANDARD | The monthly categorically needy income standard for an institutionalized individual is \$30. |
| MEDICALLY NEEDY INCOME LEVEL | The monthly medically needy income level (MNIL) is \$525. |
| COMMUNITY SPOUSE INCOME MAINTENANCE ALLOWANCE | <p>When computing the amount of monthly income the nursing home spouse must apply toward the cost of care (STEP II), the community spouse's income maintenance allowance is the lesser of:</p> <ol style="list-style-type: none">1. \$2,981 less the community spouse's own gross monthly income; or2. A combination of:<ol style="list-style-type: none">a. Shelter expenses for the community spouse's principal residence which exceed the basic shelter allowance of \$601; plusb. The basic needs standard of \$2003; lessc. The community spouse's own gross income. |
| EFFECTIVE DATE | July 1, 2016 |