



AGED, BLIND and DISABLED MEDICAID 201-4 COVERAGE GROUPS

Social Security Increase of July 1972

	ABD 201-4
Supersedes:	MA 201-7 (09/01/98)
References:	ARM 37.82.901, 903 and 42 CFR 435.134
Overview:	<p>GENERAL RULE-- Categorically needy Medicaid is provided to individuals who meet the following conditions:</p> <p>In August 1972, the individual was entitled to OASDI (Old Age, Survivors, and Disability Insurance Program) and:</p> <ol style="list-style-type: none">1. Was receiving OAA (Old Age Assistance), AB (Aid to the Blind), APTD (Aid to the Permanently and Totally Disabled), or AABD (Aid to the Aged, Blind and Disabled); or2. Would have been eligible for one of the above programs had they applied, and the State Medicaid Plan covered this optional group; or3. Would have been eligible for one of the above program if they were not in a medical institution or intermediate care facility, and the State Medicaid Plan covered this optional group; AND4. Would currently be eligible for SSI or SSP if the OASDI increase under P.L. 92-336 had not raised their income over the SSI limit. <p>This includes individuals who:</p> <ol style="list-style-type: none">1. Meet all current SSI requirements except for filing an application; or2. Would meet all current SSI requirements if they were not in a medical institution or intermediate care facility, and the State Medicaid Plan covered this optional group.
BUDGET PROCEDURE:	<ol style="list-style-type: none">1. Budget:<ul style="list-style-type: none">+ Gross Income- Social Security Increase Received in July 1972- <u>Income disregards (as appropriate)</u>= Countable Income2. Compare countable income to the Categorically Needy Standard for one person (ABD 007). If the income is:<ol style="list-style-type: none">a. Less than the standard, the individual qualifies for categorically needy Medicaid coverage; orb. Greater than the standard, the individual does not qualify for Medicaid under this group. <p>NOTE: Social Security increases received after July 1972 are not excluded from income when determining medical assistance eligibility for this coverage group.</p>
EFFECTIVE DATE	July 1, 2016