



# MEDICAID-Combined Family & ABD

## MEDICALLY NEEDY (CMA 700)

### Overview

	CMA 700
<b>Supersedes:</b>	FMA 700 (01/01/09) & MA 700 (01/01/07)
<b>References:</b>	42 CFR 435.301, 320, .322, .324, .403, .811, .831, .840, .845; ARM 37.82.101, 37.82.37.82.1101 - .1111
<b>Overview:</b>	<p><u>GENERAL RULE</u>-- Eligibility is determined for medically needy clients who are expected to meet their monthly spend down (either with incurred medical expenses or through a cash option payment to the Department). The spend down is equal to the difference between their 'total countable income' and the appropriate 'medically needy income level (MNIL)'.</p> <p>When a client does not meet their spend down for 6 consecutive months, their medically needy case is closed. They can reapply at any time in the future.</p> <p>Medically needy Medicaid coverage is provided to clients who:</p> <ol style="list-style-type: none"><li>1. Meet all Medicaid non-financial requirements for the following programs<ol style="list-style-type: none"><li>a. Family;</li><li>b. Qualified Pregnant Woman;</li><li>c. Child-Medically Needy;</li><li>d. Non IV-E Foster Care; or</li><li>e. Aged, blind or disabled.</li></ol></li><li>2. Have countable resources within the appropriate limits</li><li>3. A spend down is established;</li><li>4. Meet their spend down obligation by:<ol style="list-style-type: none"><li>a. incurring medical expenses equal to their spend down amount;</li><li>b. making a cash payment to the department; or</li><li>c. using a combination of incurred medical expenses and cash payment</li></ol></li></ol> <p><b>NOTE:</b> All eligibility criteria must be met for each month of medically needy coverage.</p>
<b>HOUSEHOLD COMPOSITION</b>	<b>Family:</b> Unless pregnant, the needs of parent(s) or other specified caretaker relatives cannot be included in medically needy coverage. Only children and pregnant women can receive Family Medically Needy coverage.
<b>BENEFIT AUTHORIZATION</b>	<p>Medically needy Medicaid is authorized/issued after:</p> <ol style="list-style-type: none"><li>1. The client(s) incurs and verifies allowable medical expenses equal to the spend down amount; or</li><li>2. The Fiscal Bureau receives a cash option payment in the spend down amount.</li></ol> <p>Fiscal Bureau staff complete the Medicaid authorization process after they receive the cash option payment.</p>



# MEDICAID-Combined Family & ABD

## MEDICALLY NEEDY (CMA 700)

### Overview

<b>DATE MEDICAID COVERAGE BEGINS</b>	Medicaid-covered expenses are paid: <ol style="list-style-type: none"><li>1. Medical Expense Incurment: from date the incurment obligation is met through month end; or</li><li>2. Cash Option: after s/he pays amount due, for the full month.</li></ol>
<b>EFFECTIVE DATE</b>	March 1, 2016