



AGED, BLIND, AND DISABLED MEDICAID 201-4 Social Security Increase of July 1972

Supersedes: MA 201-7 (09/01/98)

Reference: ARM 37.82.901, 903 and 42 CFR 435.134

Overview: Categorically needy Medicaid is provided to individuals who meet the following conditions:

In August 1972, the individual was entitled to OASDI (Old Age, Survivors, and Disability Insurance Program) and:

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); or
2. Would have been eligible for one of the above programs had they applied, and the State Medicaid Plan covered this optional group; or
3. 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; AND
4. 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.

This includes individuals who:

1. Meet all current SSI requirements except for filing an application; or
2. 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:

1. Budget:
 - + Gross Income:
 - Social Security Increase Received in 1972
 - Income disregards (as appropriate)
 - = Countable Income
2. Compare countable income to the Categorically Needy Standard for one person (ABD 007). If the income is:
 - a. Less than the standard, the individual qualifies for categorically needy Medicaid coverage; or

- b. Greater than the standard, the individual does not qualify for Medicaid under this group.

NOTE: Social Security increases received after July 1972 are not excluded from income when determining medical assistance eligibility for this coverage group.

Effective Date: July 01, 2016