NON-SSI ELIGIBILITY REGULATIONS MA-2000 NON-SSI ELIGIBILITY REGULATIONS REVISED 08/01/13 – CHANGE NO. 05-13

I. INTRODUCTION TO NON-SSI MEDICAID ELIGIBILITY DETERMINED BY DSS

In addition to Medicaid for SSI beneficiaries, North Carolina provides Medicaid to needy aged, blind, and disabled individuals who do not receive SSI. For these individuals, eligibility is determined by the county department of social services. Each individual must meet categorical, financial, and non-financial requirements of an aid/program category in order to be eligible for Medicaid.

Use the 2000 Series to determine Medicaid eligibility for all non-SSI beneficiaries.

The purpose of this section is to list the categorical, financial, and non-financial Medicaid requirements for aged, blind, and disabled individuals who do not receive SSI, and to provide a brief overview of the individuals covered under adult Medicaid by classification.

II. CATEGORICAL REQUIREMENTS FOR NON-SSI MEDICAID COVERAGE GROUPS

A. MAA

To receive under MAA the individual must be aged 65 or older.

B. MAB

To receive under MAB the individual must be legally blind according to the SSI definition of disability. Blindness is defined as central visual acuity of 20/200 or less in the better eye with the use of a correcting lens or a limitation in the field of vision of the better eye that meets certain criteria. (Also evaluate for HCWD. See MA 2180.)

C. MAD

To receive under MAD an individual must:

1. Be disabled according to the SSI definition of disability. The SSI definition of disability is: A physical or mental impairment which prevents an individual from engaging in any substantial gainful activity (or for a child under 18, an impairment of comparable severity) and which has lasted or is expected to last for at least 12 months or is expected to result in death. (For HCWD, substantial gainful activity is not a consideration. See MA 2180.)

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(II.C.)

2. Be under age 65.

D. MOB-Q

To receive under MQB-Q an individual must be enrolled in Medicare (Part A and/or B).

E. MQB-B

To be eligible under MQB-B an individual must be enrolled in Medicare Part A.

F. MQB-E

To be eligible under MQB-E an individual must be enrolled in Medicare Part A.

G. M-WD

To be eligible under MWD an individual must have lost entitlement to Medicare Part A solely due to earnings in excess of the Substantial Gainful Activity threshold as determined by SSA.

III. NON-FINANCIAL REQUIREMENTS APPLICABLE TO ADULT MEDICAID COVERAGE GROUPS

A. Be a citizen of the U.S. or a "qualified alien" as defined in MA-2506, US Citizenship Requirements or MA-2504, Alien Requirements.

Non-qualified aliens defined in MA-2504 are potentially eligible to receive Medicaid for emergency medical treatment only, including labor and delivery.

Determine alien status and the scope of Medicaid coverage the alien is permitted to receive as defined in MA-2504, Alien Requirements.

- B. Be a resident of North Carolina. Refer to MA-2220, State Residence.
- C. Not be receiving Medicaid for his own needs from another aid program/category, county, or state.
- D. Not be an inmate of a public institution unless incarcerated in a North Carolina Department of Public Safety, Division of Prisons (DOP) facility (see MA-2510/MA-3360, Living Arrangement for instructions on suspending the eligibility of DOP inmates).

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(III.)

- E. Not be in an institution for mental disease with more than 16 beds except individuals age 65 or older or individuals under age 21 receiving inpatient psychiatric services (see MA-2510/MA-3360, Living Arrangement).
- F. Provide verification of all health insurance coverage for eligible assistance unit members and assign to the state all rights to third party payments from such insurance coverage.
- G. Furnish his Social Security number, or apply for a number if he does not already have one, and furnish all Social Security numbers which he has used or under which he has received benefits.
- H. Cooperate with the local child support enforcement (IV-D) agency in establishing paternity and securing medical and child support for any deprived child for whom the individual is caretaker when assistance is requested for that child. Refer to MA-2375, Procedures for Child Support Enforcement.
- I. Apply for all benefits to which he may be entitled.

IV. FINANCIAL REQUIREMENTS APPLICABLE TO ADULT MEDICAID COVERAGE GROUPS

A. Resources

Not have countable assets that exceed the individual or couple resource limit for the classification and program in which eligibility is determined. See MA-2260, Financial Eligibility Requirements-PLA and MA-2230, Financial Resources.

B. Income

Be in financial need according to the income limits for the program in which eligibility is determined. See MA-2260, Financial Eligibility Requirements-PLA and MA-2250, Income.

C. Transfer of Assets

For Long Term Care, PACE, and CAP cases not have transferred (or established a trust) real or personal property, including liquid resources, as specified by MA-2240, Transfer of Resources.

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V. NON-SSI AGED, BLIND, AND DISABLED COVERAGE GROUPS BY CLASSIFICATION

- A. Categorically Needy No Money Payment (Refer to MA-2100, Categorically Needy - No Money Payment, MA-2110, Passalong), and MA-2180, Health Coverage for Workers with Disabilities.
 - 1. Individuals with income below 100% of the Federal Poverty Level and resources below the SSI limit who do not receive SSI.
 - 2. Individuals Deemed To Be Receiving SSI (Passalongs).
 - 3. Individuals covered under HCWD with unearned income less than or equal to 150% of Federal Poverty Level (there is no limit on total countable income for this program).

B. Medically Needy (Refer to MA-2120, Medically Needy Regulations)

Individuals who meet the non-financial eligibility requirements who have income/resources that exceed categorically needy income limits.

C. Medicare-Aid Coverage Groups

Medicare-Aid is a limited Medicaid program that supplements Medicare coverage for low income individuals.

- Qualified Medicare Beneficiaries (MQB-Q) Refer to MA-2130, Qualified Medicare Beneficiaries – Q.
- 2. Specified Low Income Medicare Beneficiaries (MQB-B) Refer to MA-2140, Qualified Medicare Beneficiaries B.
- 3. Qualified Disabled Working Individuals (MWD) Refer to MA-2150, Medicaid Working Disabled.
- 4. Qualifying Individuals QI-1's (MQB-E) Refer to MA-2160, Qualified Individuals 1 (MQB-E).