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VA - Submission Package - VA2020MS0002O - (VA-23-0004) - Eligibility

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CMS-10434 OMB 0938-1188

Package Information

Package ID VA2020MS0002O
Program Name N/A
SPA ID VA-23-0004
Version Number 1
Submitted By Emily McClellan

Submission Type Official
State VA
Region Philadelphia, PA
Package Status Review
Submission Date 2/6/2023
Regulatory Clock 90 days remain
Review Status Review 1

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

Package ID VA2020MS0002O
Submission Type Official
Approval Date N/A
Superseded SPA ID N/A

SPA ID VA-23-0004
Initial Submission Date 2/6/2023
Effective Date N/A

Reviewable Unit Instructions

State Information

State/Territory Name: Virginia

Medicaid Agency Name: Department of Medical Assistance Services

Submission Component

State Plan Amendment

Medicaid

CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Package Header

Package ID VA2020MS00020	SPA ID VA-23-0004
Submission Type Official	Initial Submission Date 2/6/2023
Approval Date N/A	Effective Date N/A
Superseded SPA ID N/A	

Reviewable Unit Instructions

SPA ID and Effective Date

SPA ID VA-23-0004

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability	1/1/2023	VA-17-0021
Non-MAGI Methodologies	1/1/2023	N/A
More Restrictive Requirements than SSI under 1902(f) - (209(b) States)	1/1/2023	N/A
Medically Needy Income Level	1/1/2023	N/A
Handling of Excess Income (Spenddown)	1/1/2023	N/A
Medically Needy Resource Level	1/1/2023	N/A
Optional Eligibility Groups	1/1/2023	VA-18-0004
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules	1/1/2023	N/A
Individuals in Institutions Eligible under a Special Income Level	1/1/2023	N/A
Age and Disability-Related Poverty Level	1/1/2023	N/A
Medically Needy Populations Based on Age, Blindness or Disability	1/1/2023	N/A

Page Number of the Superseded Plan Section or Attachment (If Applicable):

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

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Superseded SPA ID	N/A		

Reviewable Unit Instructions

Executive Summary

Summary Description Including Goals and Objectives DMAS did not increase the patient pay amount for individuals receiving long-term care services during the federal public health emergency. Some individuals who are receiving long-term care services may have had increases in income during the PHE, and these normally would have resulted in an increase in patient pay amounts. Since DMAS did not increase the patient pay, some members may have retained this income increase during the PHE. When continuous coverage requirements end, some of these individuals could lose Medicaid eligibility due to their increases in income as the accumulated resources could put them over the applicable limit if DMAS does not make any changes to eligibility rules. DMAS is filing a SPA with CMS to officially notify CMS of this decision, retroactive to the start of the federal public health emergency.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2023	\$0
Second	2024	\$0

Federal Statute / Regulation Citation

1902(r)(2) of the Social Security Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created
No items available	

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Package ID VA2020MS00020
Submission Type Official
Approval Date N/A
Superseded SPA ID N/A

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Effective Date N/A

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Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Submission - Medicaid State Plan

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

CMS-10434 OMB 0938-1188

The submission includes the following:

Administration

Eligibility

Income/Resource Methodologies

Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability

Reviewable Unit Name	Included in Another Submission Package
Financial Eligibility Requirements for Non-MAGI Groups	APPROVED

MAGI-Based Methodologies

Non-MAGI Methodologies

Reviewable Unit Name	Included in Another Submission Package
Non-MAGI Methodologies	NEW

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

Reviewable Unit Name	Included in Another Submission Package
More Restrictive Requirements than SSI under 1902(f) - (209(b) States)	NEW

Income/Resource Standards

AFDC Income Standards

Medically Needy Income Level

Reviewable Unit Name	Included in Another Submission Package
Medically Needy Income Level	NEW

Handling of Excess Income (Spendedown)

Reviewable Unit Name	Included in Another Source Type Submission Package
Handling of Excess Income (Spenddown)	NEW

Medically Needy Resource Level

Reviewable Unit Name	Included in Another Source Type Submission Package
Medically Needy Resource Level	NEW

Mandatory Eligibility Groups

Optional Eligibility Groups

Reviewable Unit Name	Included in Another Source Type Submission Package
Optional Eligibility Groups	APPROVED

Non-Financial Eligibility

Eligibility and Enrollment Processes

Benefits and Payments

Submission - Public Comment

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

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Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- Public notice was not federally required, but comment was solicited
- Public notice was federally required and comment was solicited

Submission - Tribal Input

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Reviewable Unit Instructions

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this state

- Yes
- No

This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.

- Yes
- No

The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA.

Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission:

Solicitation of advice and/or Tribal consultation was conducted in the following manner:

All Indian Health Programs

Date of solicitation/consultation:	Method of solicitation/consultation:
1/4/2023	By emailed letter.



All Urban Indian Organizations

States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:

All Indian Tribes

Date of consultation:	Method of consultation:
1/4/2023	By emailed letter.

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Name	Date Created	
Tribal Notice email	1/12/2023 1:19 PM EST	
SPA 23-004 Tribal Notice letter 1-4-23	1/12/2023 1:19 PM EST	

Indicate the key issues raised (optional)

- Access
- Quality
- Cost
- Payment methodology
- Eligibility

- **Summarize comments:** No comments, questions, or communications received in response to the emailed letter.

- **Summarize response:** No comments, questions, or communications received in response to the emailed letter.

- Benefits
- Service delivery
- Other issue

Medicaid State Plan Eligibility

Income/Resource Methodologies

Eligibility Determinations of Individuals Age 65 or Older or Who Have Blindness or a Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Package Header

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Submission Type	Official	Initial Submission Date	2/6/2023
Approval Date	N/A	Effective Date	1/1/2023
Superseded SPA ID	VA-17-0021		
	System-Derived		

Reviewable Unit Instructions

A. Eligibility Determinations of Individuals Who Are Age 65 or Older or Who Have Blindness or a Disability

Eligibility determinations of individuals who are age 65 or older or who have blindness or a disability are based on one of the following:

- 1. SSA Eligibility Determination State (1634 State)

The state has an agreement under section 1634 of the Social Security Act for the Social Security Administration to determine Medicaid eligibility of SSI beneficiaries. For all other individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, the state requires a separate Medicaid application and determines financial eligibility based on SSI income and resource methodologies.
- 2. State Eligibility Determination (SSI Criteria State)

The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility based on SSI income and resource methodologies.
- 3. State Eligibility Determination (209(b) State)

The state requires all individuals who seek Medicaid eligibility on the basis of being age 65 or older or having blindness or a disability, including SSI beneficiaries, to file a separate Medicaid application, and determines financial eligibility using income and resource methodologies more restrictive than SSI.

B. Additional information (optional)

Medicaid State Plan Eligibility

Income/Resource Methodologies

Non-MAGI Methodologies

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	User-Entered		

Reviewable Unit Instructions

The state will apply the methodologies as described below, and consistent with 42 CFR 435.601, 435.602, and 435.831.

A. Basic Financial Methodology

1. The state applies the income and resource methodologies of the SSI program when determining eligibility for a population based on age (65 or older) or having blindness or a disability, with the exceptions described below in B. through G.
2. The state applies the financial methodologies of either the SSI program or the AFDC program in effect as of July 16, 1996 (whichever is most closely related) when determining eligibility for a population based on age (as a child), pregnancy, or status as a caretaker relative, with the exceptions described below in B. through G.

B. Use of Less Restrictive and More Restrictive Methodologies

1. The state elects to apply income and/or resources methodologies that are less restrictive than those used under the cash assistance programs, in accordance with 42 CFR 435.601(d).

Yes
 No

2. The less restrictive income and resource methodologies are described on the RU for each applicable eligibility group.
3. The state applies more restrictive financial eligibility requirements to individuals who are age 65 or older or who have blindness or disability. The more restrictive requirements are no more restrictive than those requirements contained in the state's Medicaid plan in effect on January 1, 1972.
4. The more restrictive requirements are described in More Restrictive Methodologies Under 1902(f).

Non-MAGI Methodologies

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Reviewable Unit Instructions

C. Financial Responsibility of Relatives

1. In determining financial eligibility for an individual, the state does not include income and resources from anyone other than the individual's spouse, and for individuals under age 21 or who have blindness or disability, the individual's parent.

a. The state includes the income and resources of a spouse or parent only when they are living with the individual in the same household, except as follows:

i. In the case of spouses who are age 65 or older or who have blindness or disability and who share the same room in a Medicaid institution, the state:

- (1) Considers these couples either as living together or as living separately for the purpose of counting income and resources, whichever is more advantageous to the couple.
- (2) Considers these couples as living separately for the purpose of counting income and resources.

ii. Where applicable, the state determines income and resource eligibility consistent with the spousal impoverishment rules of section 1924 of the Act, as described in the Resource Assessment and Eligibility reviewable unit.

b. In the case of individuals under age 21 for whom AFDC is the most closely related cash assistance program, the income and resources of parents and spouses are included only if the individual would have been considered a dependent under the state's approved AFDC state plan in effect as of July 16, 1996.

2. In determining financial eligibility for individuals who are age 65 or older or who have blindness or a disability, the state may apply more restrictive requirements for relative responsibility than specified in B.1., but no more restrictive than the requirements under the Medicaid plan in effect on January 1, 1972. These methodologies are described in More Restrictive Methodologies under 1902(f).

Non-MAGI Methodologies

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Reviewable Unit Instructions

D. Family Size

1. The family size of an individual for whom the SSI income and resource methodologies are used (as described in section A) includes the persons identified below:

- a. The individual applying, or
- b. If the individual lives together with his or her spouse, the individual applying and the spouse, or
- c. If the individual lives together with his or her parent(s) and the individual is under 21 or has blindness or a disability, the individual applying and the parent(s).

2. The family size of an individual for whom the AFDC income and resource methodologies are used (as described in section A.), includes the persons who would have been included in the family under the state's July 16, 1996 AFDC state plan, except where the state has elected to use the MAGI-like methodologies (as described in section E).

3. The state defines family size for one or more of the following FPL eligibility groups to include others beyond those identified in D.1. and D.2.

- Yes
- No

Non-MAGI Methodologies

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Reviewable Unit Instructions

E. Use of MAGI-like Methodologies

1. The state uses MAGI-like methodologies for one or more populations for whom the most closely related cash assistance program would be the AFDC program in effect as of July 16, 1996.

- Yes
- No

2. The election to use MAGI-like methodologies is described on the RU for each applicable eligibility group.

3. The MAGI-like methodology is consistent with 42 CFR 435.603(b) through (f) with respect to definitions, household income, and definition of household, except:

a. The agency elects to use the MAGI definition of parent when considering the financial responsibility of relatives, which includes natural or biological parents, as well as adopted parents and stepparents.

- Yes
- No

b. Less restrictive methodologies can be used, as described in section B.

c. The financial responsibility requirements for relatives are applicable, as described in section C.

d. The countable income deductions for the medically needy are applicable, when the MAGI-like methodologies are applied to the medically needy, as described in section F.

Non-MAGI Methodologies

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Reviewable Unit Instructions

F. Countable Income Deductions for the Medically Needy

In determining countable income for individuals who are age 65 or older or who have blindness or a disability, the state deducts:

1. Amounts that are no more restrictive than those used under the Medicaid plan on January 1, 1972, and no more liberal than those used in determining eligibility under SSI or an optional state supplement, and
2. Amounts that are at least the same as those that would be deducted in determining eligibility under the eligibility group for individuals in 209(b) states who are age 65 or older or who have blindness or a disability (described in 42 CFR 435.121).

Non-MAGI Methodologies

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Reviewable Unit Instructions

G. Additional Information (optional)

Medicaid State Plan Eligibility

Income/Resource Methodologies

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

The state applies more restrictive requirements than SSI under the authority of section 1902(f) of the Act, and consistent with 42 CFR 435.121.

A. Use of More Restrictive Requirements

The state applies more restrictive eligibility requirements to individuals who are age 65 or older or who have blindness or disability. The more restrictive requirements are no more restrictive than those requirements contained in the state's Medicaid plan in effect on January 1, 1972. The state does not apply more restrictive requirements if:

1. The requirement conflicts with the requirements of section 1924 of the Act, which governs the eligibility and post-eligibility treatment of income and resources of institutionalized individuals with community spouses;
2. The requirement conflicts with a more liberal requirement which the agency has elected to use under 42 CFR 435.601; or
3. The more restrictive requirement conflicts with a more liberal requirement the state has elected to use under §435.234(c) in determining eligibility for State supplementary payments.

B. Populations with More Restrictive Requirements

The state applies more restrictive requirements for the following populations:

- 1. Individuals age 65 or older
- 2. Individuals who have blindness
- 3. Individuals who have a disability

C. Types of More Restrictive Requirements Used

The state applies more restrictive requirements for the following populations:

- 1. The state uses more restrictive requirements with respect to income.
- 2. The state uses more restrictive requirements with respect to resources.
- 3. The state uses more restrictive requirements with respect to the definition of disability.
- 4. The state uses more restrictive requirements with respect to the definition of blindness.
- 5. The state uses more restrictive requirements with respect to financial responsibility of relatives.
- 6. The state uses other more restrictive requirements.

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

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Reviewable Unit Instructions

E. More Restrictive Requirements with Respect to Resources

The following more restrictive requirements are used with respect to resources:

- 1. The state uses a lower resource standard than the SSI or the Optional State Supplement standard for eligibility groups under Mandatory Coverage and Options for Coverage.
- 2. The state uses more restrictive requirements with respect to the treatment of real property.
 - a. The state uses a more restrictive requirement with respect to the treatment of home property.

Description:
See Supplement 5 to Attachment 2.6-A
 - b. The state uses other more restrictive requirements related to real property.

Name of requirement:	Description:
Real Property	See Supplement 5 to Attachment 2.6-A

- 3. The state uses more restrictive requirements with respect to the treatment of lump sums.
- 4. The state uses more restrictive requirements with respect to the treatment of personal property.
- 5. The state uses other more restrictive requirements with respect to resources:

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

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Reviewable Unit Instructions

J. Income Deductions

When applying more restrictive requirements, the state deducts SSI payments received by the individual and state supplement payments that meet the conditions specified in 42 CFR 435.232 and 435.234. The state also allows the following individuals to deduct incurred medical and remedial expenses (spend down) to become categorically eligible under the group for individuals in 209(b) states who are age 65 or over or who have blindness or a disability:

1. SSI beneficiaries and eligible spouses of SSI beneficiaries

2. State supplement recipients or individuals who are eligible for but not receiving a state supplementary payment.

3. Individuals who would be eligible for SSI/SSP but for OASDI COLA increases since April, 1977 (42 CFR 435.135)

In determining countable income used for the purpose of calculating spend down for this population, the state deducts OASDI benefits, as follows:

- a. All of the OASDI benefits is deducted from income.
- b. Part of the OASDI benefits is deducted from income.
- c. None of the OASDI benefits is deducted from income.

4. Disabled widows and widowers ineligible for SSI due to increase in OASDI (42 CFR 435.137)

In determining countable income used for the purpose of calculating spend down for this population, the state deducts OASDI benefits, as follows:

- a. All of the OASDI benefits is deducted from income.
- b. Part of the OASDI benefits is deducted from income.
- c. None of the OASDI benefits is deducted from income.

5. Disabled widows and widowers ineligible for SSI due to early receipt of social security (42 CFR 435.138)

In determining countable income used for the purpose of calculating spend down for this population, the state deducts OASDI benefits, as follows:

- a. All of the OASDI benefits is deducted from income.
- b. Part of the OASDI benefits is deducted from income.
- c. None of the OASDI benefits is deducted from income.

6. Adult children with disabilities (1939(a)(2)(D) and 1634(c) of the Act)

In determining countable income used for the purpose of calculating spend down for this population, the state deducts OASDI benefits, as follows:

- a. All of the OASDI benefits is deducted from income.
- b. Part of the OASDI benefits is deducted from income.
- c. None of the OASDI benefits is deducted from income.

More Restrictive Requirements than SSI under 1902(f) - (209(b) States)

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K. Additional Information (optional)

Medicaid State Plan Eligibility

Income/Resource Standards

Medically Needy Income Level

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A. Income Level Used

- The state employs a single income level for the medically needy, subject to the condition described in A.3.
- The income level varies based on differences between shelter costs in urban and rural areas.
 - Yes
 - No
- The state has a separate income level for the individuals who are age 65 or older, or who have blindness or a disability.
 - Yes
 - No
- The level used is:

Household size	Standard
1	\$332.18
2	\$383.29
3	\$498.28

The state uses an additional incremental amount for larger household sizes.

- Yes
- No

Incremental Amount:
\$85.85

The dollar amounts increase automatically each year

- Yes
- No

The basis of the increase is:

- CPI-U
- Other basis

The annual increase occurs in the month and day indicated:
Every 1 of July

Medically Needy Income Level

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B. Basis for Income Level

1. Minimum Income Level

The minimum income level for this eligibility group is the lower of the state's July 1996 AFDC payment standard or the state's income standard for the Parents and Other Caretaker Relatives eligibility group.

2. Maximum Income Level

The maximum income level for this eligibility group is 133 1/3 percent of the higher of the state's 1996 AFDC payment standard or the state's income standard for the Parents and Other Caretaker Relatives eligibility group.

Medically Needy Income Level

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C. Additional Information (optional)

Medicaid State Plan Eligibility

Income/Resource Standards

Handling of Excess Income (Spendedown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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If countable income exceeds the income standard, the state must deduct from income medical expenses incurred by the individual or family or financially responsible relatives that are not subject to payment by a third party, in accordance with 42 CFR 435.831 and 42 CFR 435.121.

A. Budget Periods

Income in excess of the appropriate income standard is considered available for payment of medical or remedial care expenses in budget periods that do not exceed six months.

1. In determining income eligibility, countable income is reduced by the amount of incurred medical or remedial care expenses during the budget period specified below:

- a. One budget period of:
- b. More than one budget period, as described below:
 - i. Community budget period

Length of budget period:

- (1) 6 months
- (2) 5 months
- (3) 4 months
- (4) 3 months
- (5) 2 months
- (6) 1 month

- ii. Institutional budget period

Length of budget period:

- (1) 6 months
- (2) 5 months
- (3) 4 months
- (4) 3 months
- (5) 2 months
- (6) 1 month

- iii. Other budget period

Handling of Excess Income (Spendedown)

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Reviewable Unit Instructions

B. Types of Eligible Expenses

- In determining incurred expenses to be deducted from income, the state includes:
 - Medicare, Medicaid, and other health insurance premiums and enrollment fees.
 - Cost sharing, including copayments, coinsurance, and deductibles, imposed by Medicare, Medicaid or other health insurance.
 - Expenses for necessary medical and remedial services recognized by state law but not included in the state plan.
 - Expenses for necessary medical and remedial services included in the state plan, including those that exceed limitations on the amount, duration, and scope of services.
- The state also includes medical institutional expenses projected to the end of the budget period at the Medicaid reimbursement rate.
 - Yes
 - No
- Incurred expenses subject to payment by a third party are not deducted unless the third party is a public program (other than Medicaid) of a state and the program is financed by the state.

Handling of Excess Income (Spenddown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

Package ID	VA2020MS0002O	SPA ID	VA-23-0004
Submission Type	Official	Initial Submission Date	2/6/2023
Approval Date	N/A	Effective Date	1/1/2023
Superseded SPA ID	N/A		
	User-Entered		

Reviewable Unit Instructions

C. Timeframe of Deduction of Expenses

In determining incurred expenses to be deducted from income, the state deducts:

1. Incurred medical and remedial expenses without regard to the age of the expenses.
2. Payments made during the budget period on eligible expenses incurred at any time, if not previously deducted in establishing eligibility.
3. Unpaid eligible expenses incurred at any time prior to the budget period, which have not been deducted previously in establishing eligibility.

Handling of Excess Income (Spendedown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Package Header

Package ID	VA2020MS00020	SPA ID	VA-23-0004
Submission Type	Official	Initial Submission Date	2/6/2023
Approval Date	N/A	Effective Date	1/1/2023
Superseded SPA ID	N/A		
	User-Entered		

Reviewable Unit Instructions

D. Order of Deduction of Expenses

Incurred medical or remedial care expenses are deducted in the following order:

- 1. By the type of service, in the following order:
 - a. Premiums, deductibles, coinsurance and co-payments.
 - b. Expenses for necessary medical or remedial care services that are recognized under state law but not included in the State Plan.
 - c. Expenses for necessary medical or remedial care services that are included in the state Plan that exceed agency limitations on amount, duration, or scope of services.
 - d. Expenses for necessary medical or remedial care services that are included in the state Plan that are within the agency limitations on amount, duration, or scope of services.
- 2. In chronological order by the date of the service, or the date cost sharing payments are due.
- 3. In chronological order by the date the bill is submitted to the state by the individual.

Handling of Excess Income (Spendedown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

E. Reasonable Limitations

The state sets reasonable limits on the amount to be deducted for expenses.

- Yes
- No

Handling of Excess Income (Spendedown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

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	User-Entered		

Reviewable Unit Instructions

F. Spendedown Payments Made by Individuals

The state permits individuals to pay-in their spenddown liability.

- Yes
- No

Handling of Excess Income (Spenddown)

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

G. Additional Information (optional)

D. 2. In chronological order by the date of service.

Medicaid State Plan Eligibility

Income/Resource Standards

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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	User-Entered		

Reviewable Unit Instructions

A. Medically Needy Resource Level Structure

1. The state employs a single resource level for the medically needy, subject to the condition described in A.3.
2. The resource level is equal to or higher than the lowest resource standard used under the most closely related cash assistance program.
3. The state has a separate resource level for the individuals who are age 65 or older, or who have blindness or a disability that is more restrictive than the resource level used for other medically needy populations.

- Yes
- No

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Package Header

Package ID VA2020MS00020

Submission Type Official

Approval Date N/A

Superseded SPA ID N/A

User-Entered

SPA ID VA-23-0004

Initial Submission Date 2/6/2023

Effective Date 1/1/2023

Reviewable Unit Instructions

B. Resource Level Used

The level used is:

Household size	Standard
1	\$2000.00
2	\$3000.00

The state uses an additional incremental amount for larger household sizes.

- Yes
- No

Medically Needy Resource Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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	User-Entered		

Reviewable Unit Instructions

C. Additional Information (optional)

DMAS ABD households are no more than two people - the resource level is \$2,000.

Medicaid State Plan Eligibility

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

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Superseded SPA ID	VA-18-0004		
	System-Derived		

Reviewable Unit Instructions

A. Options for Coverage

The state provides Medicaid to specified optional groups of individuals.

Yes No

















The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Optional Coverage of Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Reasonable Classifications of Individuals under Age 21		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Children with Non-IV-E Adoption Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Independent Foster Care Adolescents		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Optional Targeted Low Income Children		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals above 133% FPL under Age 65		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Needing Treatment for Breast or Cervical Cancer		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Eligible for Family Planning Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals with Tuberculosis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Electing COBRA Continuation Coverage		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Individuals Eligible for but Not Receiving Cash Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Individuals Eligible for Cash Except for Institutionalization		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Optional State Supplement Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals in Institutions Eligible under a Special Income Level		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
PACE Participants		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving Hospice		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children under Age 19 with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Age and Disability-Related Poverty Level		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Work Incentives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Ticket to Work Basic		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	NEW
Ticket to Work Medical Improvements		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Family Opportunity Act Children with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

B. Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medically needy.

Yes No

The medically needy eligibility groups covered in the state plan are:

1. Mandatory Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Medically Needy Pregnant Women		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Medically Needy Children under Age 18		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Protected Medically Needy Individuals Who Were Eligible in 1973		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

2. Optional Medically Needy:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Medically Needy Reasonable Classifications of Individuals under Age 21		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Medically Needy Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type
Medically Needy Populations Based on Age, Blindness or Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Individuals who would be eligible for Medicaid if they were in an institution and who receive home and community-based services.

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	User-Entered		

Reviewable Unit Instructions

The state operates the Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Would be eligible for Medicaid if in a medical institution.
2. But for the provision of home and community-based services under a waiver granted under section 1915(c), (d) or (e) of the Act:
 - a. For waivers granted under 1915(c), the individuals would otherwise require the level of care furnished in a hospital, a nursing facility or an intermediate care facility for individuals with intellectual disabilities.
 - b. For waivers granted under 1915(d) or (e), the individuals would otherwise require the level of care furnished in a hospital or nursing facility.
3. Will receive the waived services.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

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Reviewable Unit Instructions

B. Income and Resource Methodologies

1. The income and resource methodologies used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

The state uses a less restrictive methodology with respect to resources set aside for burial.

A higher amount is disregarded:

Amount: \$3500.00

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

The value of a countable motor vehicle is totally disregarded, without limits or conditions.

- One motor vehicle
- More than one motor vehicle

Household goods and services are disregarded as a resource.

Description of disregard: The value of all household goods and personal effects are disregarded as resources.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Payments made for involuntary sterilization.	For all aged, blind, or disabled individuals, both categorically needy and medically needy, the Commonwealth shall disregard as resources amounts received as payment for involuntary sterilization under the Virginia Eugenic Sterilization Act, beyond the allowable nine-month exclusion by the SSI program's resource methodologies.
Disregard excess resources due to COVID-19	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of income (PETI) rules, but which became countable resources on or after March 18, 2020, will be disregarded until the individual's second Medicaid renewal that

Name of methodology:

Description:

follows the end of the COVID-19 public health emergency.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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	User-Entered		

Reviewable Unit Instructions

C. Income and Resource Standards

The income and resource standards used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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	User-Entered		

Reviewable Unit Instructions

D. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Individuals who are in medical institutions for at least 30 consecutive days who are eligible under a special income level.

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Superseded SPA ID	N/A		
	User-Entered		

Reviewable Unit Instructions

The state covers Individuals in Institutions Eligible under a Special Income Level in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Have been in a medical institution for at least 30 consecutive days.
2. Have income at or below a standard described in section D.

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

B.Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

- Yes
- No

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

C. Financial Methodologies

- 1. The methodologies of the most closely related cash assistance program are used in calculating income and resources, except that income disregards are not applied. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- 2. More restrictive requirements than the most closely related cash assistance program are used in calculating countable income and/or resources, except that income disregards are not applied. Please refer as necessary to More Restrictive Requirements than SSI under 1902(f), completed by the state.
- 3. Less restrictive methodologies are used in calculating countable resources.
 - Yes
 - No

The less restrictive resource methodologies are:

- The state uses a less restrictive methodology with respect to resources set aside for burial.
 - A higher amount is disregarded: **Amount:** \$3500.00
- The state uses a less restrictive methodology with respect to the treatment of motor vehicles.
 - The value of a countable motor vehicle is totally disregarded, without limits or conditions.
 - One motor vehicle
 - More than one motor vehicle
- Household goods and services are disregarded as a resource. **Description of disregard:** The value of all household goods and personal effects are disregarded as resources.
- A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.
- The following less restrictive methodologies are used:

Name of methodology:	Description:
Payments made for involuntary sterilization.	For all aged, blind, or disabled individuals, both categorically needy and medically needy, the Commonwealth shall disregard as resources amounts received as payment for involuntary sterilization under the Virginia Eugenic Sterilization Act, beyond the allowable nine-month exclusion by the SSI program's resource methodologies.
Disregard excess resources due to COVID-19	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of income (PETI) rules, but which became countable resources on or after March 18, 2020, will be disregarded until the individual's second Medicaid renewal that follows the end of the COVID-19 public health emergency.

Individuals in Institutions Eligible under a Special Income Level

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Reviewable Unit Instructions

D. Income Standard Used

The income standard for this group is:

- 1. 300% of the SSI Federal Benefit Rate (FBR) for an individual
- 2. Other lower income level

Individuals in Institutions Eligible under a Special Income Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

E.Resource Standard Used

The resource standard for this group is the one used for the most closely-related cash assistance program.

Individuals in Institutions Eligible under a Special Income Level

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Reviewable Unit Instructions

F.Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Individuals who are age 65 or older or who have a disability, with income no higher than 100% FPL.

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Reviewable Unit Instructions

The state covers the optional Age and Disability-Related Poverty Level eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet at least one of the following condition(s):
 - a. Are age 65 or older; or
 - b. Have a disability.
2. Have income and resources at or below the standard for this group.

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

B. Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

No

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

C. Financial Methodologies

1. SSI methodologies are used in calculating household income and resources. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

a. The state uses the same less restrictive income methodologies for all individuals covered.

- Yes
- No

b. The less restrictive income methodologies used for all individuals eligible under the group, except for those populations separately identified is:

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: All census income is disregarded for ABD categorically and medically needy individuals as well as F&C medically needy individuals.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Disregard of in-kind support and maintenance.	For aged, blind, and disabled individuals, both categorically and medically needy, with the exception of the special income level group of institutionalized individuals, as well as Medically Needy children and pregnant women, the Commonwealth of Virginia shall disregard the value of in-kind support and maintenance when determining eligibility. In-kind support and maintenance means food, clothing, or

Name of methodology:	Description:
	shelter or any combination of these provided to an individual.
Disregard of income for medically needy children.	The Commonwealth will disregard all earned income of a child under the age of 19 years who is a student.
Income exemption for interest earned on one interest bearing savings account.	For ADC-related medically needy cases, any individual or family applying for or receiving assistance shall be granted an income exemption. Any interest earned on one interest-bearing savings or investment account per assistance unit not to exceed \$5,000, if the applicant, applicants, recipient or recipients designate that the account is reserved for purposes related to self-sufficiency, shall be exempt when determining eligibility for medical assistance for so long as the funds and interest remain on deposit in the account.

c. The less restrictive income methodologies (if any) used for other populations are:

i. Individuals age 65 or older

Less restrictive methodologies are used in calculating countable income for this population.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: All census income is disregarded for ABD categorically and medically needy individuals as well as F&C medically needy individuals.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Disregard of in-kind support and maintenance.	For aged, blind, and disabled individuals, both categorically and medically needy, with the exception of the special income level group of institutionalized individuals, as well as Medically Needy children and pregnant women, the Commonwealth of Virginia shall disregard the value of in-kind support and maintenance when determining eligibility. In-kind support and maintenance means food, clothing, or shelter or any combination of these provided to an individual.
Disregard of income for medically needy children.	The Commonwealth will disregard all earned income of a child under the age of 19 years who is a student.
Income exemption for interest earned on one interest bearing savings account.	For ADC-related medically needy cases, any individual or family applying for or receiving assistance shall be granted an income exemption. Any interest earned on one interest-bearing savings or investment account per assistance unit not to exceed \$5,000, if the applicant, applicants, recipient or recipients designate that the account is reserved for purposes related to self-sufficiency, shall be exempt when determining eligibility for medical assistance for so long as the funds and interest remain on deposit in the account.

ii. Individuals who have blindness

Less restrictive methodologies are used in calculating countable income for this population.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: All census income is disregarded for ABD categorically and medically needy individuals as well as F&C medically needy individuals.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Disregard of in-kind support and maintenance.	For aged, blind, and disabled individuals, both categorically and medically needy, with the exception of the special income level group of institutionalized individuals, as well as Medically Needy children and pregnant women, the Commonwealth of Virginia shall disregard the value of in-kind support and maintenance when determining eligibility. In-kind support and maintenance means food, clothing, or shelter or any combination of these provided to an individual.
Disregard of income for medically needy children.	The Commonwealth will disregard all earned income of a child under the age of 19 years who is a student.
Income exemption for interest earned on one interest bearing savings account.	For ADC-related medically needy cases, any individual or family applying for or receiving assistance shall be granted an income exemption. Any interest earned on one interest-bearing savings or investment account per assistance unit not to exceed \$5,000, if the applicant, applicants, recipient or recipients designate that the account is reserved for

Name of methodology:	Description:
	purposes related to self-sufficiency, shall be exempt when determining eligibility for medical assistance for so long as the funds and interest remain on deposit in the account.

- iii. Individuals who have a disability
- iv. All children with a disability under a specified age limit:
 - i. Under age 21
 - ii. Under age 20
 - iii. Under age 19
 - iv. Under age 18

Less restrictive methodologies are used in calculating countable income for this population.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: All census income is disregarded for ABD categorically and medically needy individuals as well as F&C medically needy individuals.

- The following less restrictive methodologies are used:

Name of methodology:	Description:
Disregard of in-kind support and maintenance.	For aged, blind, and disabled individuals, both categorically and medically needy, with the exception of the special income level group of institutionalized individuals, as well as Medically Needy children and pregnant women, the Commonwealth of Virginia shall disregard the value of in-kind support and maintenance when determining eligibility. In-kind support and maintenance means food, clothing, or shelter or any combination of these

Name of methodology:	Description:
Disregard of income for medically needy children.	provided to an individual. The Commonwealth will disregard all earned income of a child under the age of 19 years who is a student.
Income exemption for interest earned on one interest bearing savings account.	For ADC-related medically needy cases, any individual or family applying for or receiving assistance shall be granted an income exemption. Any interest earned on one interest-bearing savings or investment account per assistance unit not to exceed \$5,000, if the applicant, applicants, recipient or recipients designate that the account is reserved for purposes related to self-sufficiency, shall be exempt when determining eligibility for medical assistance for so long as the funds and interest remain on deposit in the account.

- v. Reasonable classifications of children with a disability
- vi. Parents and other caretaker relatives
- vii. Pregnant women

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

a. The state uses the same less restrictive resource methodologies for all individuals covered.

- Yes
- No

b. The less restrictive resource methodologies used for all individuals eligible under the group, except for those populations separately identified is:

The less restrictive resource methodologies are:

- The state uses a less restrictive methodology with respect to resources set aside for burial.

A higher amount is disregarded: **Amount:** \$3500.00

- The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

The value of a countable motor vehicle is totally disregarded, without limits or conditions.

One motor vehicle
 More than one motor vehicle

Household goods and services are disregarded as a resource.

Description of disregard: The value of all household goods and personal effects are disregarded as resources.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Payments made for involuntary sterilization.	For all aged, blind, or disabled individuals, both categorically needy and medically needy, the Commonwealth shall disregard as resources amounts received as payment for involuntary sterilization under the Virginia Eugenical Sterilization Act, beyond the allowable nine-month exclusion by the SSI program's resource methodologies.
Disregard excess resources due to COVID-19	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of income (PETI) rules, but which became countable resources on or after March 18, 2020, will be disregarded until the individual's second Medicaid renewal

Name of methodology:	Description:
	that follows the end of the COVID-19 public health emergency.

c. The less restrictive income methodologies (if any) used for other populations are:

i. Individuals age 65 or older

Less restrictive methodologies are used in calculating countable resource for this population.

- Yes
- No

The less restrictive resource methodologies are:

The state uses a less restrictive methodology with respect to resources set aside for burial.

A higher amount is disregarded: **Amount:** \$3500.00

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

The value of a countable motor vehicle is totally disregarded, without limits or conditions. One motor vehicle More than one motor vehicle

Household goods and services are disregarded as a resource.

Description of disregard: The value of all household goods and personal effects are disregarded as resources.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Payments made for involuntary sterilization.	For all aged, blind, or disabled individuals, both categorically needy and medically needy, the Commonwealth shall disregard as resources amounts received as payment for involuntary sterilization under the Virginia

Name of methodology:	Description:
Disregard excess resources due to COVID-19	<p>Eugenical Sterilization Act, beyond the allowable nine-month exclusion by the SSI program's resource methodologies.</p> <p>Disregard resources accumulated due to patient pay increases not collected by the state Medicaid agency and retained by individuals who received Medicaid for payment of long term services and supports while residing in nursing facilities or receiving community based care in their home during the federal COVID-19 public health emergency.</p>

ii. Individuals who have blindness

Less restrictive methodologies are used in calculating countable resource for this population.

- Yes
- No

The less restrictive resource methodologies are:

The state uses a less restrictive methodology with respect to resources set aside for burial.

A higher amount is disregarded: **Amount:** \$3500.00

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

The value of a countable motor vehicle is totally disregarded, without limits or conditions. One motor vehicle More than one motor vehicle

Household goods and services are disregarded as a resource.

Description of disregard: The value of all household goods and personal effects are disregarded as resources.

- A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.
- The following less restrictive methodologies are used:

Name of methodology:	Description:
Payments made for involuntary sterilization.	For all aged, blind, or disabled individuals, both categorically needy and medically needy, the Commonwealth shall disregard as resources amounts received as payment for involuntary sterilization under the Virginia Eugenic Sterilization Act, beyond the allowable nine-month exclusion by the SSI program's resource methodologies.
Disregard excess resources due to COVID-19	Disregard resources accumulated due to patient pay increases not collected by the state Medicaid agency and retained by individuals who received Medicaid for payment of long term services and supports while residing in nursing facilities or receiving community based care in their home during the federal COVID-19 public health emergency.

- iii. Individuals who have a disability
- iv. All children with a disability under a specified age limit:
- v. Reasonable classifications of children with a disability
- vi. Parents and other caretaker relatives
- vii. Pregnant women

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

Package ID	VA2020MS0002O	SPA ID	VA-23-0004
Submission Type	Official	Initial Submission Date	2/6/2023
Approval Date	N/A	Effective Date	1/1/2023
Superseded SPA ID	N/A		
	User-Entered		

Reviewable Unit Instructions

D. Income Standard Used

The income standard for this eligibility group is:

- 1. 100% FPL
- 2. A lower percent of the FPL:

80.00% FPL

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Package Header

Package ID	VA2020MS00020	SPA ID	VA-23-0004
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Reviewable Unit Instructions

E. Resource Standard Used

The resource standard used is:

- 1. The resource limit for the SSI program; or
- 2. The resource limit used in the state's medically needy program, if higher.

Age and Disability- Related Poverty Level

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

F. Additional Information (optional)

For item C2c (iii), the less restrictive income methodology of not counting census income applies. The system will not allow us to check this box without unchecking other boxes.

For item C3c (iii) , the less restrictive income methodologies applies. The system will not allow us to check this box without unchecking other boxes. The COVID-related disregard also applies to individuals receiving Medicaid-funded LTSS in a nursing facility.

Medicaid State Plan Eligibility

Eligibility Groups - Medically Needy

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

Individuals who are age 65 or older or who have blindness or a disability who do not qualify as categorically needy.

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The state covers the optional Medically Needy Populations Based on Age, Blindness or Disability eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet at least one of the following:
 - a. Are age 65 or older;
 - b. Have blindness; or
 - c. Have a disability.
2. Are not otherwise eligible for categorically needy coverage under the state plan.
3. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

B. Individuals Covered

The state covers the following populations:

- 1. Individuals age 65 or older
- 2. Individuals with blindness
- 3. Individuals who have a disability

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

C. Financial Methodologies

1. The state uses the same financial methodology for all individuals covered.

- Yes
- No

2. The financial methodology used is:

- a. SSI methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.
- b. More restrictive requirements than SSI. Please refer as necessary to More Restrictive Requirements than SSI under 1902(f), completed by the state.
- c. Less restrictive methodologies are used in calculating countable income.
 - Yes No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: All census income is disregarded for ABD categorically and medically needy individuals as well as F&C medically needy individuals.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Disregard of in-kind support and maintenance.	For aged, blind, and disabled individuals, both categorically and medically needy, with the exception of the special income level group of institutionalized individuals, as well as Medically Needy children and pregnant women, the Commonwealth of Virginia shall disregard the value of in-kind support and maintenance when determining eligibility. In-kind support and maintenance means food, clothing, or shelter or any combination of these

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d. Less restrictive methodologies are used in calculating countable resources.

Yes No

The less restrictive resource methodologies are:

The state uses a less restrictive methodology with respect to resources set aside for burial.

A higher amount is disregarded: **Amount:** \$3500.00

The state uses a less restrictive methodology with respect to the treatment of motor vehicles.

The value of a countable motor vehicle is totally disregarded, without limits or conditions. One motor vehicle More than one motor vehicle

Household goods and services are disregarded as a resource.

Description of disregard: The value of all household

goods and personal effects are disregarded as resources.

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Disregard excess resources due to COVID-19	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of income (PETI) rules, but which became countable resources on or after March 18, 2020, will be disregarded until the individual's second Medicaid renewal that follows the end of the COVID-19 public health emergency.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

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Reviewable Unit Instructions

D. Income Standard Used

The income standard used for this group is described in the Medically Needy Income Level RU.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

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Reviewable Unit Instructions

E. Resource Standard Used

The resource standard used for this group is described in the Medically Needy Resource Level RU.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS0002O | VA-23-0004

Package Header

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Reviewable Unit Instructions

F. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | VA2020MS00020 | VA-23-0004

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Reviewable Unit Instructions

G. Additional Information (optional)

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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