<u>Medicaid: treatment of income and resources of individuals</u> requesting or receiving long-term care services.

- (A) This rule describes the treatment of income and resources for individuals requesting or receiving long-term care (LTC) services, in accordance with rule 5160:1-6-01 of the Administrative Code.
- (B) Definition. "Individual" for the purposes of this rule, is defined in rule 5160:1-6-01 of the Administrative Code.
- (C) An individual with no spouse.
 - (1) During any month in which an adult individual with no spouse is requesting or receiving LTC services, only the income and resources of the individual are considered.
 - (2) An individual is considered to be an adult when his or her age exceeds the identified age of a child in the base eligibility criteria, as defined in Chapters 5160:1-3, 5160:1-4, and 5160:1-5 of the Administrative Code, as applicable.

(D) An individual who is a child.

- (1) A child is considered to be living with his or her parent(s) for the first thirty days following a request for LTC services. The income and resources of the parents are considered available to the child.
- (2) A child who is requesting or receiving LTC services is considered an individual after the initial thirty-day period. Only the income and resources of the child are considered.
- (3) An individual is considered to be a child when his or her age does not exceed the identified age of a child in the base eligibility criteria, as defined in Chapters 5160:1-3, 5160:1-4, and 5160:1-5 of the Administrative Code, as applicable.
- (E) Spouses who are both requesting or receiving LTC services.
 - (1) If both spouses are likely to receive LTC services for more than thirty days, treat each as an individual.
 - (2) If both spouses are not likely to receive LTC services for more than thirty days, treat the spouses as a couple for the first thirty days, using their combined income and resources.
 - (3) If both spouses reside in or are admitted to the same room of a medical institution, the spouses may choose to be considered as a couple or as individuals.

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(F) An individual with a community spouse.

(1) In accordance with section 1924 of the Social Security Act (as in effect November 1, 2016), during any month in which one spouse is requesting or receiving LTC services, eligibility shall be determined in the following order:

- (a) If neither spouse is receiving SSI, the couple shall first be screened for modified adjusted gross income (MAGI) base eligibility, in accordance with Chapter 5160:1-4 of the Administrative Code, using MAGI household composition, family size, and income. If the household income exceeds the applicable MAGI federal poverty level percentage and the individual is likely to receive LTC services for more than thirty days, then the income of the community spouse shall be removed and MAGI base eligibility shall be explored for only the individual.
- (b) If the individual is not financially eligible for MAGI base eligibility, the income of both spouses shall be combined and the individual shall be screened for non-MAGI base eligibility, in accordance with Chapter 5160:1-3 of the Administrative Code. If the combined income of both spouses exceed the non-MAGI income standard and the individual is likely to receive LTC services for more than thirty days, the income of the community spouse shall be removed for budgeting purposes.
- (c) If the individual is not financially eligible for non-MAGI base eligibility, determine the individual's eligibility using the special income level (SIL), in accordance with rule 5160:1-3-04.2 of the Administrative Code.
- (2) The treatment of resources for an individual with a community spouse shall be determined as described in Chapters 5160:1-3, 5160:1-4, 5160:1-5, and 5160:1-6 of the Administrative Code, as applicable.

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