Implementation Guide:
Medicaid State Plan Eligibility
Protected Medically Needy Individuals
Who Were Eligible in 1973

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Protected Medically Needy Individuals Who Were Eligible in 1973

POLICY CITATION

Statute: 1902(a)(10)(C)

Regulations: 42 C.F.R. §435.340

BACKGROUND

Overview
This reviewable unit (RU) describes the protected medically needy eligibility group. Individuals in this group were eligible as medically needy in 1973 and continue to meet all current requirements for Medicaid except for the blindness or disability criteria.

The medically needy option allows states to provide Medicaid to individuals and families who have incomes and/or countable resources exceeding the categorically needy eligibility standards (i.e., standards for the mandatory eligibility groups and the optional eligibility groups elected by the state, excluding the medically needy). While covering the medically needy is an option for states, a state that elects to cover the medically needy must cover the three mandatory medically needy groups and may extend coverage to one or more of the optional medically needy groups.

<table>
<thead>
<tr>
<th>Mandatory Medically Needy Groups</th>
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<tbody>
<tr>
<td>Pregnant women</td>
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<tr>
<td>Children under age 18</td>
</tr>
<tr>
<td>Protected medically needy individuals who were eligible in 1973</td>
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</tbody>
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<tr>
<th>Optional Medically Needy Groups</th>
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<tbody>
<tr>
<td>Reasonable classifications of individuals under age 21</td>
</tr>
<tr>
<td>Parents and other caretaker relatives</td>
</tr>
<tr>
<td>Populations based on age, blindness, or disability</td>
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States have significant flexibility regarding the income standard and the resource standard applied to the medically needy, as well as the coverage offered to medically needy individuals. A unique feature of medically needy eligibility is that individuals who would be Medicaid eligible, but for income in excess of the eligibility standard, may reduce their countable income by the amount of their (and their family members’) incurred medical and remedial care expenses. This process is known as “spending down” excess income, or just as “spenddown.” Additional information on the spenddown can be found in the implementation guide that accompanies the Handling of Excess Income (Spenddown) RU.
Characteristics
The Protected Medically Needy Individuals Who Were Eligible in 1973 group is a medically needy group established by section 1902(a)(10)(C) of the Social Security Act (the Act). Specifically, these are individuals who:

- Were eligible as medically needy in December 1973 on the basis of the blindness or disability criteria of the aid to the blind under title X (AB), aid to the permanently and totally disabled under title XIV (APTD), or aid to the aged, blind or disabled under title XVI (AABD) plan;
- For each consecutive month after December 1973, continue to meet: 1) Those blindness or disability criteria; and 2) The eligibility requirements for the medically needy under the December 1973 plan; and
- Meet all current requirements as medically needy, except for the blindness or disability criteria.

Similar to the medically needy pregnant women and children under age 18 groups, a state that elects to cover the medically needy must cover the Protected Medically Needy Individuals Who Were Eligible in 1973 group. To be eligible under this group, individuals must have been eligible as medically needy in December 1973 and must have continued to meet those eligibility criteria for each consecutive month since. As such, while it is possible that some individuals continue to receive coverage under this group, there will be no new applications for eligibility under this group.
INSTRUCTIONS

A. Characteristics
   There are statements (A.1. through A.3.) describing the characteristics of this eligibility group.

B. Additional Information (Optional)
   Except in limited circumstances, this field remains blank. Please consult with CMS before adding any additional information concerning this RU.

REVIEW CRITERIA

No specific review criteria are needed.