Revision: HCFA-PM-92-1 (MB) ATTACHMENT 2.6-A February 1992 Page 1

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement

A. General Conditions of Eligibility

Each individual covered under the plan:

42 CFR Part 435, 1. Is financially eligible (using the methods and standards described in Parts B and C of this Subpart G Attachment) to receive services.

42 CFR Part 435, 2. Meets the applicable non-financial eligibility Subpart F conditions.

a. For the categorically needy:

(i) Except as specified under items A.2.a.(ii) and (iii) below, for AFDC-related individuals, meets the non-financial eligibility conditions of the AFDC program.

(ii) For SSI-related individuals, meets the non-financial criteria of the SSI program or more restrictive SSI-related categorically needy criteria.

(iii) For financially eligible pregnant women, infants or children covered under Sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(i)(VII), and

1902(a)(10)(A)(ii)(IX) of the Act, meets the non-financial criteria of Section 1902(1) of the Act.

(iv) For financially eligible aged and disabled individuals covered under Section 1902(a)(10)(A)(ii)(X) of the Act, meets the non-financial criteria

1902(m) of the Act

1902(1) of the

Act

of Section 1902(m) of the Act.

TN No. 92-11 Supersedes Approval Date 4/1/92 Effective Date 1/1/92

TN No. 91-22

August 1991 Page 2
OMB No.: 0938-

State: <u>NEVADA</u>

Citation Condition or Requirement

b. For the medically needy, meets the non-financial eligibility conditions of 42 CFR Part 435.

1905(p) of the Act

c. For financially eligible qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act, meets the non-financial criteria of Section 1905(p) of the Act.

1905(s) of the Act

d. For financially eligible qualified disabled and working individuals covered under Section 1902(a)(10)(E)(ii) of the Act, meets the non-financial criteria of Section 1905(s).

TN No.13-0025-MM Approval Date: December 19, 2013 Effective Date: January 1,2014

Supersedes TN No.91-22

August 1991

OMB No.: 0938-

Page 3

State: <u>NEVADA</u>

<u>Citation</u> <u>Condition or Requirement</u>

Reserved

TN No.: <u>13-0023-MM5</u> Approval Date: <u>May 30, 2014</u> Effective Date: <u>January 1, 2014</u>

Supersedes

TN No. <u>13-0025-MM</u>

AUGUST 1991

Page 3a OMB No.: 0938-

State: NEVADA

Citation

#### Condition or Requirement

42 CFR 435.1008 5. a. Is not an inmate of a public institution. Public institutions do not include medical institutions, nursing facilities, or publicly operated community residences that serve no more than 16 residents, or certain child care institutions.

42 CFR 435.1008 1905(a) of the Act b. Is not a patient under age 65 in an institution for mental diseases except as an inpatient under age 22 receiving active treatment in an accredited psychiatric facility or program.

 $\frac{N/A}{}$  Not applicable with respect to individuals under age 22 in psychiatric facilities or programs. Such services are not provided under the plan.

42 CFR 433.145 1912 of the 6. Is required, as a condition of eligibility, to assign rights to medical support and to payments for medical care from any third party, to cooperate in obtaining such support and payments, and to cooperate in identifying and providing information to assist in pursuing any liable third party. The assignment of rights obtained from an applicant or recipient is effective only for services that are reimbursed by Medicaid. The requirements of 42 CFR 433.146 through 433.148 are met.

N/A Assignment of rights is automatic because of State law.

42 CFR 435.910

7. Is required, as a condition of eligibility, to furnish his/her social security account number (or numbers, if he/she has more than one number).

TN No. 91-22 Supersedes TN No. N/A

October 1991

Page 3a.1 OMB No.: 0938-

State/Territory: NEVADA

#### Citation

#### Condition or Requirement

An applicant or recipient must also cooperate in establishing the paternity of any eligible child and in obtaining medical support and payments for himself or herself and any other person who is eligible for Medicaid and on whose behalf the individual can make an assignment; except that individuals described in 1902(1)(1)(A) of the Social Security Act (pregnant women and women in the post-partum period) are exempt from these requirements involving paternity and obtaining support. Any individual may be exempt from the cooperation requirements by demonstrating good cause for refusing to cooperate.

An applicant or recipient must also cooperate in identifying any third party who may be liable to pay for care that is covered under the State plan and providing information to assist in pursuing these third parties. Any individual may be exempt from the cooperation requirements by demonstrating good cause for refusing to cooperate.

\_\_\_\_ Assignment of rights is automatic because of State law.

42 CFR 435.910

7. Is required, as a condition of eligibility, to furnish his/her social security account number (or numbers, if he/she has more than one number).

TN No. 92-9Supersedes
TN No. N/A

August 1991 Page 3b

OMB No.: 0938-

State: NEVADA

Citation

Condition or Requirement

1902(c)(2)

8. Is not required to apply for AFDC benefits under title IV-A as a condition of applying for, or receiving, Medicaid if the individual is a pregnant woman, infant, or child that the State elects to cover under Sections 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX) of the Act.

1902(e)(10)(A) and (B) of the Act

9. Is not required, as an individual child or pregnant woman, to meet requirements under Section 402(a)(43) of the Act to be in certain living arrangements. (Prior to terminating AFDC individuals who do not meet such requirements under a State's AFDC plan, the agency determines if they are otherwise eligible under the State's Medicaid plan.)

TN No. 91-22 Supersedes TN No. N/A

October 1991 Page 3c

OMB No.: 0938-

State/Territory: NEVADA

Citation Condition or Requirement

1906 of the Act 10. Is required to apply for enrollment in an employer-based cost-effective group health plan, if such plan is available to the individual. Enrollment is a condition of eligibility except for the individual who is unable to enroll on his/her own behalf (failure of a parent to enroll a child does not affect a child's eligibility).

TN No. 92-9
Supersedes
TN No. N/A

Revision: CMS-PM-02-1 ATTACHMENT 2.6-A Page 4 OMB No.:0938-0673

May 2002

State:

Citation	Condition or Requirement	
В.	Post eligibility Treatmen	t of Institutionalized Individuals' Incomes
	<ol> <li>The following items are not considered in the post eligibility process:</li> </ol>	
1902(o) of the Act	and (G	d SSP benefits paid under §1611(e)(1)(E) ) of the Act to individuals who receive care spital, nursing home, SNF, or ICF.
Bondi v. Sullivan (SSI)	payme Genera State f	an Reparation Payments (pension (reparation) nts made under §500 - 506 of the Austrian al Social Insurance Act). Applies only if collows SSI program rules with respect to yments.
1902(r)(1) of the Act		n Reparations Payments (reparation payments by the Federal Republic of Germany).
105/206 of P. L. 100-383	d. Japane	se and Aleutian Restitution Payments.
1. (a) of P.L. 103-286		lands Reparation Payments based on Nazi, but banese, persecution (during World War II).
10405 of P.L. 101-239	or any settlen	nts from the Agent Orange Settlement Fund other fund established pursuant to the nent in the In re Agent orange product y litigation, M.D.L. No.381 (E.D.N.Y.)
6(h)(2) of P.L. 101-426	g. Radiat	ion Exposure Compensation.
12005 of P. L. 103-66		nsions limited to \$90 per month under .C. 5503.

May 2002

State: Nevada

ATTACHMENT 2.6-A Page 4a OMB No.:0938-0673

#### Citation

## Condition or Requirement

1924 of the Act 435.725 435.733 435.832 2. The following monthly amounts for personal needs are deducted from total monthly income in the application of an institutionalized individual's or couple's income to the cost of institutionalized care:

Personal Needs Allowance (PNA) of not less than \$30 For Individuals and \$60 For Couples for All Institutionalized Persons.

a. Aged, blind, disabled:

Individuals \$154 effective 01/01/2024

PNA for individuals in a Nursing Facility (NF) or Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID) is equivalent to the PNA of individuals living in a group/domiciliary care who receive a State Supplemental Payment (SSP) (\$154 in 2024). This figure is adjusted annually by the cost-of-living adjustment (COLA) as determined by the Social Security Administration (SSA).

Couples \$ N/A

For the following persons with greater need:

Institutionalized individuals with no community spouse living in the home but with other dependent family members in the home as described in Attachment 2.6.A page 5.

<u>Supplement 12 to Attachment 2.6-A page 1</u> describes the Greater need, describes the basis or formula for determining the deductible amount when a specific amount is not listed above; and lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

b. AFDC related:

Children \$ 35. Adults \$ 35.

For the following persons with greater need:

Supplement 12 to <u>Attachment 2.6-A</u> describes the greater need describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

c. Individual under age 21 covered in the plan as specified in Item B. 7. of Attachment 2.2 -A.

\$<u>35.</u>

TN No.:25-0010 Approval Date: February 27, 2025 Effective Date: January 16, 2025

Supersedes TN No.: 24-0012

May 2002

State: Nevada

ATTACHMENT 2.6-A Page 4b OMB No.:0938-0673

Citation

#### Condition or Requirement

For the following persons with greater need:

Supplement 12 to Attachment 2.6-A describes the greater need describes the basis or formula for determining the deductible amount when a specific amount is not listed above; lists the criteria to be met; and, where appropriate, identifies the organizational unit which determines that a criterion is met.

1924 of the Act

- 3. In addition to the amounts under item 2, the following monthly amounts are deducted from the remaining income of an institutionalized individual with a community spouse:
  - a. The monthly income allowance for the community spouse, calculated using the formula in §1924(d)(2), is the amount by which the maintenance needs standard exceeds the community spouse's income. The maintenance needs standard cannot exceed the maximum prescribed in §1924 (d)(3)(C). The maintenance needs standard consists of a poverty level component plus an excess shelter allowance.

X The maintenance needs standard for all community spouses are set at the maximum

 The poverty level component is
calculated using the applicable
percentage (set out §1924(d)(3)(B) of the
Act) of the official poverty level.
 The poverty level component is
calculated using a percentage greater
than the applicable percentage, equal to
%, of the official poverty level
(still subject to maximum maintenance needs standard).

Except that, when applicable, the State will set the community spouse's monthly income allowance at the amount by which exceptional maintenance needs, established at a fair hearing, exceed the community spouse's income, or at the amount of any court-ordered support.

permitted by §1924(d)(3)(C).

TN No: 22-0002 Supersedes TN No: 00-09

Approval Date: February 9, 2022 Effective Date January 1, 2022

May 2002

State:

ATTACHMENT 2.6-A Page 4c OMB No.:0938-0673

Citation		Condition or Requirement
		In determining any excess shelter allowance, utility expenses are calculated using:
		x the standard utility allowance under §5(e) of the Food Stamp Act of 1977 or
		the actual unreimbursable amount of the community spouse's utility expenses less any portion of such amount included in condominium or cooperative charges.
	b.	The monthly income allowance for other dependent family members living with the community spouse is:
		one-third of the amount by which the poverty level component (calculated under §1924(d)(3)(A)(i) of the Act, using the applicable percentage specified in §1924 (d)(3)(B)) exceeds the dependent family member's monthly income.
		a greater amounted calculated as follows:
		The following definition is used in lieu of the definition provided by the Secretary to determine the dependency of family members under §1924 (d)(1):
	c.	Amounts for health care expenses described below that are incurred by and for the institutionalized individual and are not subject to payments by a third party:
		(i) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.
		(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amounts are described in Supplement 3 to ATTACHMENT 2.6-A.)

Approval Date: 3/3/01 Effective Date: 01/01/01

Revision

HCFA-PM-97-2 December 1997 ATTACHMENT 2.6-A Page 5 OMB No.: 0938-0673

State:  $\underline{NEVADA}$ 

Citation	Condition or Req	uirement
435.725 435.733 435.832	4.	In addition to any amounts deductible under the items above, the following monthly amounts are deducted from the remaining monthly income of an institutionalized individual or an institutionalized couple:
		a. An amount for the maintenance needs of each member of a family living in the institutionalized individual's home with no company spouse living in the home. The amount must be based on a reasonable assessment of need but must not exceed the higher of the:
		AFDC level, or Medically needy level:
		(Check one)
		_x AFDC levels in Supplement 1 to Attachment 2.6.A page 1 _ Medically needy level in Supplement 1
		b. Amounts for health care expenses described below that have not been deducted under 3.c. above (i.e., for an institutionalized individual with a community spouse), are incurred by and for the institutionalized individual or institutionalized couple and are not subject to the payment by a third party.
		(I) Medicaid, Medicare, and other health insurance premiums, deductibles, or coinsurance charges, or copayments.
		(ii) Necessary medical or remedial care recognized under State law but not covered under the State plan. (Reasonable limits on amount are described in Supplement 3 to <u>ATTACHMENT 2.6-A</u> )
435.725 435.733 435.832	5.	At the option of the State, as specified below, the following is deducted from any remaining monthly income of an institutionalized individual or an institutionalized couple:
		A monthly amount for the maintenance of the home of the individual or couple for not longer than 6 months if a physician has certified that the individual, or one member of the institutionalized couple, is likely to return to the home within that period:
		No Yes (the applicable amount is shown on page 5a.)

May 2002

State:

ATTACHMENT 2.6-A Page 5a OMB No.:0938-0673

Citation	Condition or Requirement	Condition or Requirement		
	N/A Amount for maintenance of home is: \$			
	N/A Amount for maintenance of home is the actual maintenance costs not to exceed \$			
	N/A Amount for maintenance of home is deductible when countable income is determined under §1924(d)(1) of the Act only if the individual's home and the community spouse's home is different.			
	N/A Amount for maintenance of home is not deductible when countable income is determined under §1924 (d)(1) of the Act.			

Approval Date: 3/30/01 Effective Date 01/01/01

Revision: HCFA-PM-92-1 (MB) ATTACHMENT 2.6-A February 1992 Page 6

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

#### ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)

Condition or Requirement

42 CFR 435.711 435.721, 435.831

## C. Financial Eligibility

For individuals who are AFDC or SSI recipients, the income and resource levels and methods for determining countable income and resources of the AFDC and SSI program apply, unless the plan provides for more restrictive levels and methods than SSI for SSI recipients under Section 1902(f) of the Act, or more liberal methods under Section 1902(r)(2) of the Act, as specified below.

For individuals who are not AFDC or SSI recipients in a non-Section 1902(f) State and those who are deemed to be cash assistance recipients, the financial eligibility requirements specified in this Section C apply.

Supplement 1 to ATTACHMENT 2.6-A specifies the income levels for mandatory and optional categorically needy groups of individuals, including individuals with incomes related to the Federal income poverty level--pregnant women and infants or children covered under Sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(ii)(IX) of the Act and aged and disabled individuals covered under Section 1902(a)(10)(A)(ii)(X) of the Act--and for mandatory groups of qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act.

"EXCEPT AS PROVIDED UNDER SECTION 1924 OF THE ACT, THE POLICIES REFLECTED IN `C' APPLY. SEE SUPPLEMENT 13 FOR ADDITIONAL POLICIES RELATIVE TO SECTION 1924."

TN No. 92-11 Supersedes TN No. 91-22

August 1991 Page 6a

OMB No.: 0938-

State: NEVADA

Citation

Condition or Requirement

- XX Supplement 2 to ATTACHMENT 2.6-A specifies the resource levels for mandatory and optional categorically needy poverty level related groups, and for medically needy groups.
- ${\rm N/A} \over {\rm levels}$  for categorically needy aged, blind and disabled persons who are covered under requirements more restrictive than SSI.
- N/A Supplement 4 to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that have more restrictive methods than SSI, permitted under Section 1902(f) of the Act.
- $\frac{\text{N/A}}{\text{A}}$  Supplement 5 to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that have more restrictive methods than SSI, permitted under Section 1902(f) of the Act.
- XX Supplement 8a to ATTACHMENT 2.6-A specifies the methods for determining income eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under Section 1902(r)(2) of the Act.
- XX Supplement 8b to ATTACHMENT 2.6-A specifies the methods for determining resource eligibility used by States that are more liberal than the methods of the cash assistance programs, permitted under Section 1902(r)(2) of the Act.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

#### ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)

Condition or Requirement

1902(r)(2) of the Act

- 1. Methods of Determining Income
  - a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).
    - (1) In determining countable income for AFDC-related individuals, the following methods are used:
      - \_\_\_\_ (a) The methods under the State's approved AFDC plan only; or
      - XX (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
    - (2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.

1902(e)(6) the Act

(3) Agency continues to treat women eligible under the provisions of Sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.

TN No. 92-11 Supersedes Approval Date 4/1/92 Effective Date 1/1/92 TN No. 91-22

Revision: HCFA-PM-92-1 (MB) ATTACHMENT 2.6-A February 1992 Page 7a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s)

Condition or Requirement

42 CFR 435.721 435.831, and 1902(m)(1)(B)(m)(4) and 1902(r)(2) of the Act

b. Aged individuals. In determining countable income for aged individuals, including aged individuals with incomes up to the Federal poverty level described in Section 1902(m)(1) of the Act, the following methods are used:

The methods of the SSI program only.

 $\underline{XXX}$  The methods of the SSI program and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

TN No. 92-11
Supersedes Approval Date: 4/1/92 Effective Date: 01/01/92

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State: NEVADA

Citation

Condition or Requirement

- N/A For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of Section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A; and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
- $\frac{N/A}{}$  For institutional couples, the methods specified under Section 1611(e)(5) of the Act.
- $\frac{N/A}{}$  For Optional State supplement recipients under '435.230, income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A.
- $\frac{N/A}{}$  For Optional State supplement recipients in Section 1902(f) States and SSI criteria States without Section 1616 or 1634 agreements--

 SSI methods only.
 SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT $2.6-A$ .
 Methods more restrictive and/or more liberal than SSI. More restrictive methods are

In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses.

Supplement 8a to ATTACHMENT 2.6-A.

described in Supplement 4 to ATTACHMENT 2.6-A and more liberal methods are described in

TN No. 91-22 Supersedes

TN No. N/A

Revision: HCFA-PM-91-4 (BPD) ATTACHMENT 2.6-A August 1991 Page 9 OMB No.: 0938-State: NEVADA Citation Condition or Requirement 42 CFR 435.721 and c. Blind individuals. In determining countable 435.831 income for blind individuals, the following 1902(m)(l)(B), methods are used: (m)(4), and The methods of the SSI program only. 1902(r)(2) of the Act XX SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A. N/A For individuals other than optional State supplement recipients, more restrictive methods than SSI, applied under the provisions of Section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A, and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A. N/A For institutional couples, the methods specified under Section 1611(e)(5) of the Act. N/A For Optional State supplement recipients under '435.230, income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A. N/A For Optional State supplement recipients in Section 1902(f) States and SSI criteria States without Section 1616 or 1634 agreements--SSI methods only. SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.

TN No. 91-22 Supersedes TN No. 91-13 \_\_\_ Methods more restrictive and/ or more liberal than SSI. More restrictive methods are

Supplement 8a to ATTACHMENT 2.6-A.

described in <u>Supplement 4 to ATTACHMENT 2.6-A</u> and more liberal methods are described in

> Page 10 August 1991

OMB No.: 0938-

State: NEVADA

Citation

Condition or Requirement

In determining relative responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.

and 435.831 1902(m)(1)(B), (m)(4), and 1902(r)(2) of the Act

42 CFR 435.721, d. Disabled individuals. In determining countable income of disabled individuals, including individuals with incomes up to the Federal poverty level described in Section 1902(m) of the Act the following methods are used:

Tł	ne	methods	of	the	SSI	program.
----	----	---------	----	-----	-----	----------

- XX SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
- N/A For institutional couples: the methods specified under Section 1611(e)(5) of the Act.
- \_ For optional State supplement recipients under '435.230: income methods more liberal than SSI, as specified in Supplement 4 to ATTACHMENT 2.6-A.
- \_ For individuals other than optional State supplement recipients (except aged and disabled individuals described in Section 1903(m)(1) of the Act): more restrictive methods than SSI, applied under the provisions of Section 1902(f) of the Act, as specified in Supplement 4 to ATTACHMENT 2.6-A; and any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

TN No. 91-22 Supersedes TN No. 91-13

ATTACHMENT 2.6-A Revision: HCFA-PM-91-4 (BPD) August 1991 Page 11 OMB No.: 0938-State: NEVADA Citation Condition or Requirement N/A For Optional State supplement recipients in Section 1902(f) States and SSI criteria States without Section 1616 or 1634 agreements--SSI methods only. \_\_\_\_ SSI methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A. \_\_\_\_ Methods more restrictive and/or more liberal than SSI, except for aged and disabled individuals described in Section 1902(m)(1) of the Act. More restrictive methods are described in Supplement 4 to ATTACHMENT 2.6-A and more liberal methods are specified in Supplement 8a to ATTACHMENT 2.6-A. In determining relative financial responsibility, the

TN No. 91-22
Supersedes Approval Date 0
TN No. N/A

agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living

with parents until the children become 21.

February 1992 Page 11a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement

1902(1)(3)(E) and 1902(r)(2) of the Act

- e. Poverty level pregnant women, infants, and children. For pregnant women and infants or children covered under the provisions of Sections 1902(a)(10)(A)(i)(IV), (VI), and (VII), and 1902(a)(10)(A)(ii)(IX) of the Act--
  - (1) The following methods are used in determining countable income:
  - The methods of the State's approved AFDC plan.
  - The methods of the approved title IV-E plan.
  - $\frac{\rm XX}{\rm X}$  The methods of the approved AFDC State plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.
  - \_\_\_\_ The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A.

TN No. 92-11
Supersedes Approval Date 04/01/92 Effective Date 01/01/92

Supersedes TN No. 91-22

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement

(2) In determining relative financial responsibility, the agency considers only the income of spouses living in the same household as available to spouses and the income of parents as available to children living with parents until the children become 21.

1902(e)(6) of the Act (3) The agency continues to treat women eligible under the provisions of Sections 1902(a)(10) of the Act as eligible, without regard to any changes in income of the family of which she is a member, for the 60-day period after her pregnancy ends and any remaining days in the month in which the 60th day falls.

1905(p)(1), 1902(m)(4), and 1902(r)(2) of the Act

- f. Qualified Medicare beneficiaries. In determining countable income for qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act, the following methods are used:
  - The methods of the SSI program only.
  - $\frac{\rm XX}{\rm SSI}$  methods and/or any more liberal methods than SSI described in Supplement 8a to ATTACHMENT 2.6-A.
  - For institutional couples, the methods specified under Section 1611(e)(5) of the Act.

TN No. 92-11

Supersedes Approval Date 04/01/92 Effective Date 01/01/92 TN No. 91-22

Revision: HCFA-PM-93-2 (MB) ATTACHMENT 2.6-A March 1993 Page 12a

State: NEVADA

Citation

Condition or Requirement

If an individual receives a title II benefit, any amounts attributable to the most recent increase in the monthly insurance benefit as a result of a title II COLA is not counted as income during a "transition period" beginning with January, when the title II benefit for December is received, and ending with the last day of the month following the month of publication of the revised annual Federal poverty level.

For individuals with title II income, the revised poverty levels are not effective until the first day of the month following the end of the transition period.

For individuals not receiving title II income, the revised poverty levels are effective no later than the date of publication.

1905(s) of the Act

g. (1) Qualified disabled and working individuals.

In determining countable income for qualified disabled and working individuals covered under 1902(a)(10)(E)(ii) of the Act, the methods of the SSI program are used.

1905(p) of the Act beneficiaries.

(2) Specified low-income Medicare

In determining countable income for specified low-income Medicare beneficiaries covered under 1902(a)(10)(E)(iii) of the Act, the same method as in f. is used.

TN No. 93-09
Supersedes
TN No. 92-11

Revision: HCFA-PM-91-8 (MB) ATTACHMENT 2.6-A October 1991 Page 12b

OMB No.:

State/Territory: NEVADA

Citation Condition or Requirement

1902(u) (h of the Act

(h) COBRA Continuation Beneficiaries

 $\frac{N/A}{}$  In determining countable income for COBRA continuation beneficiaries, the following disregards are applied:

The disregards of the SSI program;

The agency uses methodologies for treatment of income more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4

to Attachment 2.6-A.

NOTE: For COBRA continuation beneficiaries specified at 1902(u)(4), costs incurred from medical care or for any other type of remedial care shall not be taken into account in determining income, except as provided in

Section 1612(b)(4)(B)(ii).

TN No. 92-9
Supersedes
TN No. N/A

State Nevada		Attachment 2.6a Page 12d
1902(a)(10)(A) (ii)(XV) of the Act	(ii)	Working Individuals with Disabilities – Basic Coverage Group - TWWIIA
		In determining financial eligibility for working individuals with disabilities under this provision, the following standards and methodologies are applied:
		The agency does not apply any income or resource standard.
		NOTE: If the above option is chosen, no further eligibility-related options should be elected.
		X The agency applies the following income and/or resource standard(s):
		The agency applies the following income and or resource standard(s):
		1. The maximum Gross Unearned Income standard is \$699.00.
		2. The maximum Net Income standard is 250% of the Federal Poverty Level (FPL).
		3. The resource standard is \$15,000.00 in non-excluded resources.
TN# 04 020		

TN# <u>04-020</u> Supersedes TN# <u>04-10</u>

STATE PLAN UNDER TITL	E XIX OF THE SOCIAL SECURITY ACT
State Nevada	Attachment 2.6a Page 12e
1902(a)(10)(A) (ii)(XV) of the Act (cont.)	Income Methodologies
	In determining whether an individual meets the income standard described above, the agency uses the following methodologies.
	The income methodologies of the SSI program.
	The agency uses methodologies for treatment of income that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A.
	X The agency uses more liberal income methodologies than the SSI program. More liberal income methodologies are described in Supplement 8a to Attachment 2.6-A.

TN# <u>04-010</u> Supersedes TN# N/A

State: Nevada	Attachment 2.6a Page 12f
1902(a)(10)(A) (ii)(XV) of the Act (cont.)	Resource Methodologies
(ii)(XV) of the Act (cont.)	In determining whether the individual meets the resource standard described above, the agency uses the following methodologies.
	Unless one of the following items is checked the agency, under the authority of Section 1902(r)(2) of the Act, disregards all funds held in retirement funds and accounts, including private retirement accounts such IRAs and other individual accounts, and employer-sponsored retirement plans such as 401(k) plans, Keogh plans, and employer pension plans. Any disregard involving retirement accounts is separately described in Supplement 8b to Attachment 2.6-A.
	The agency disregards funds held in employer- sponsored retirement plans, but not private retirement plans.
	The agency disregards funds in retirement accounts in a manner other than those described above. The agency's disregards are specified in Supplement 8b to Attachment 2.6-A.

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

	STATE PLAN UNDER TITL	E AIA U	FIRE SOCIAL SECURITI ACT
State: Nevada			Attachment 2.6a Page 12g
1902(a)(10)(A) of the Act (cont.)			The agency does not disregard funds in retirement (ii)(XV) accounts.
		_X_	The agency uses resource methodologies in addition to any indicated above that are more liberal than those used by the SSI program. More liberal resource methodologies are described in Supplement 8b to Attachment 2.6A
			The agency uses the resource methodologies of the SSI program.
			The agency uses methodologies for treatment of resources that are more restrictive than the SSI program. These more restrictive methodologies are described in Supplement 5 to Attachment 2.6-A.

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

State: Nevada Attachment 2.6a
Page 12n

1902(a)(10)(A)(ii)(XIII), (XVI), and 1916(g) of the Act (cont.) For individuals eligible under the Basic Coverage (XV), Group described in No. 2y on Page 23d of Attachment 2.2-A:

NOTE: Regardless of the option selected below, the agency MUST require that individuals whose annual adjusted gross income, as defined under IRS statute, exceeds \$75,000 pay 100% of premiums.

\_X\_ The agency requires individuals to pay premiums or other cost-sharing charges on a sliding scale based on income below 450% of the Federal poverty level for a family of the size involved, the amount of premiums cannot exceed 7.5% of the individual's income.

The premiums or other cost-sharing charges, and how they are applied, are described on Page 12o.

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

Approval Date <u>09/22/04</u>

State _	Nevada	Attachment 2.6a
		Раде 120

Sections 1902(a)(10)(A) (ii)(XV), (XVI), and 1916(g) of the Act (cont.)

## Premiums and Other Cost-Sharing Charges

For the Basic Coverage Group and the Medical Improvement Group, the agency's premium or other cost-sharing charges, and how they are applied, are described below.

Payment of a premium applies to an individual who has Combined Net Income greater than 0% FPL but less than or equal to 250% FPL. The premium calculation is determined as follows:

- 1. An individual with Combined Net Income of greater than 0% FPL and less than 200% FPL pays a premium of 5% of the individual's Combined Net Income.
- 2. An individual with Combined Net Income between 200% FPL and 250% FPL pays a premium of 7.5% of the individual's Combined Net Income.
- 3. No other cost sharing charges apply.

TN# <u>04-010</u> Supersedes TN# <u>N/A</u>

August 1991 Page 13

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

1902(k) of the  $\,$  2. Medicaid Qualifying Trusts Act

In the case of a Medicaid qualifying trust described in Section 1902(k)(2) of the Act, the amount from the trust that is deemed available to the individual who established the trust (or whose spouse established the trust) is the maximum amount that the trustee(s) is permitted under the trust to distribute to the individual. This amount is deemed available to the individual, whether or not the distribution is actually made. This provision does not apply to any trust or initial trust decree established before April 7, 1986, solely for the benefit of a mentally retarded individual who resides in an intermediate care facility for the mentally retarded.

 $\frac{\mathrm{N/A}}{\mathrm{A}}$  The agency does not count the funds in a trust as described above in any instance where the State determines that it would work an undue hardship.  $\frac{\mathrm{Supplement}\ 10\ \text{of}\ \mathrm{ATTACHMENT}\ 2.6-\mathrm{A}}{\mathrm{constitutes}\ \mathrm{an}\ \mathrm{undue}\ \mathrm{hardship}}$ 

1902(a)(10) 3. Medically needy income levels (MNILs) are based on of the Act  $\,$  N/A  $\,$  family size.

Supplement 1 to ATTACHMENT 2.6-A specifies the MNILs for all covered medically needy groups. If the agency chooses more restrictive levels under Section 1902(f) of the Act, Supplement 1 so indicates.

TN No. 91-22 Supersedes TN No. 87-10

August 1991 Page 14

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

42 CFR 435.732, 4. Handling of Excess Income - Spend-down for the Medically Needy in All States and the Categorically Needy in 1902(f) States Only

435.831

#### a. Medically Needy

- (1) Income in excess of the MNIL is considered as available for payment of medical care and services. The Medicaid agency measures available income for periods of either or \_\_\_\_ month(s) (not to exceed six months) to determine the amount of excess countable income applicable to the cost of medical care and services.
- (2) If countable income exceeds the MNIL standard, the agency deducts the following incurred expenses in the following order:
  - (a) Health insurance premiums, deductibles and coinsurance charges.
  - (b) Expenses for necessary medical and remedial care not included in the plan.
  - (c) Expenses for necessary medical and remedial care included in the plan.
    - Reasonable limits on amounts of expenses deducted from income under a.(2)(a) and (b) above are listed below.

1902(a)(17) of the Act

Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly funded program (other than Medicaid) of a State or local government.

TN No. 91-22 Supersedes Approval Date 01/13/92 Effective Date 10/01/91 TN No. 87-10

> August 1991 Page 15

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

b. Categorically Needy - Section 1902 (f) States

42 CFR N/A435.732

The agency applies the following policy under the provisions of Section 1902(f) of the Act. The following amounts are deducted from income to determine the individual's countable income:

- (1) Any SSI benefit received.
- (2) Any State supplement received that is within the scope of an agreement described in Sections 1616 or 1634 of the Act, or a State supplement within the scope of Section 1902(a)(10)(A)(ii)(XI) of the Act.
- (3) Increases in OASDI that are deducted under 435.134 and 435.135 for individuals specified in that section, in the manner elected by the State under that section.
- (4) Other deductions from income described in this plan at Attachment 2.6-A, Supplement 4.
- (5) Incurred expenses for necessary medical and remedial services recognized under State law.

1902(a)(17) of the Act, P.L. 100-203

Incurred expenses that are subject to payment by a third party are not deducted unless the expenses are subject to payment by a third party that is a publicly funded program (other than Medicaid) of a State or local government.

TN No. 91-22 Supersedes Approval Date 01/13/92 Effective Date 10/01/91

TN No. 87-10

August 1991 Page 16

OMB No.: 0938-

State:

Citation Condition or Requirement

- 5. Methods for Determining Resources
  - a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).
    - (1) In determining countable resources for AFDC-related individuals, the following methods are used:
      - (a) The methods under the State's approved AFDC plan; and
    - XX (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in <u>Supplement 8b to ATTACHMENT</u> 2.6-A.
    - (2) In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.

TN No. 91-22 Supersedes TN No. 89-8

August 1991 Page 16a

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

## 5. Methods for Determining Resources

1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B) and (C), and 1902(r) of the Act b. Aged individuals. For aged individuals covered under Section 1902(a)(10)(A)(ii)(X) of the Act, the agency used the following methods for treatment of resources:

\_\_\_\_ The methods of the SSI program.

 $\frac{\rm XX}{\rm SSI}$  methods and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.

Methods that are more restrictive (except for individuals described in Section 1902(m)(1) of the Act) and/or more liberal than those of the SSI program. Supplement 5 to ATTACHMENT 2.6-A describes the more restrictive methods and Supplement 8b to ATTACHMENT 2.6-A specifies the more liberal methods.

TN No. 91-22
Supersedes Approva

August 1991 Page 17

OMB No.: 0938-

State: NEVADA

Citation

Condition or Requirement

In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses.

1902(a)(10)(A), 1902(a)(10)(C), 1902(m)(1)(B), and 1902(r) of the Act

c. <u>Blind individuals</u>. For blind individuals the agency uses the following methods for treatment of resources:

The methods of the SSI program.

XX SSI methods and/or any more liberal methods described in Supplement 8b to ATTACHMENT 2.6-A.

Methods that are more restrictive and/or more liberal than those of the SSI program. Supplement 5 to ATTACHMENT 2.6-A describe the more restrictive methods and Supplement 8b to ATTACHMENT 2.6-A specify the more liberal methods.

In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21.

TN No. 91-22

 Revision: HCFA-PM-91-4 (BPD) ATTACHMENT 2.6-A August 1991 Page 18 OMB No.: 0938-State: NEVADA Citation Condition or Requirement 1902(a)(10)(A), d. Disabled individuals, including individuals 1902(a)(10)(C), covered under Section 1902(a)(10)(A)(ii)(X) of the Act. The agency uses the following 1902 (m) (1) (B) methods for the treatment of resources: and (C), and 1902(r)(2) of the Act The methods of the SSI program. XX SSI methods and/or any more liberal methods described in Supplement 8a to ATTACHMENT 2.6-A. Methods that are more restrictive (except for individuals described in Section 1902(m)(1) of the Act) and/or more liberal that those under the SSI program. More restrictive methods are described in Supplement 5 to ATTACHMENT 2.6-A and more liberal methods are specified in Supplement 8b to ATTACHMENT 2.6-A. In determining relative financial responsibility, the agency considers only the resources of spouses living in the same household as available to spouses and the resources of parents as available to children living with parents until the children become 21. e. Poverty level pregnant women covered under 1902(1)(3) and 1902(r)(2) Sections 1902(a)(10)(A)(i)(IV) and of the Act 1902(a)(10)(A)(ii)(IX)(A) of the Act. The agency uses the following methods in the treatment of resources. The methods of the SSI program only. \_\_\_\_ The methods of the SSI program and/or any more liberal methods described in Supplement 5a or Supplement 8b to ATTACHMENT 2.6-A.

TN No. 04-08 Supersedes 07/01/04 TN No. 92-23

August 1991

Page 19 OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

- Methods that are more liberal than those of SSI. The more liberal methods are specified in <u>Supplement 5a</u> or Supplement 8b to ATTACHMENT 2.6-A.
- X Not applicable. The agency does not consider resources in determining eligibility.

1902(1)(3) and f. Poverty level infants covered under Section 1902(r)(2) of  $\frac{1902(a)(10)(A)(i)(IV)}{1902(a)(10)(A)}$ 

The agency uses the following methods for the treatment of resources:

The methods of the State's approved AFDC plan.

Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), in accordance with Section 1902(1)(3)(C) of the Act, as specified in Supplement 5a to ATTACHMENT 2.6-A.

Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in <u>Supplement 5a or Supplement 8b to Attachment 2.6-A.</u>

X Not applicable. The agency does not consider resources in determining eligibility.

TN No. 04-08 Supersedes TN No. 92-23

1902(1)(3)(C)

of the Act

1902(r)(2)

of the Act

February 1992 Page

19a

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: <u>NEVADA</u>

	ELIGIBILIT	TY CONDITIONS AND REQUIREMENTS
Citation(s)	Condition or Requirement	
1902(1)(3) and 1902(r)(2) of the Act	g. 1.	Poverty level children covered under Section 1902(a)(10)(A)(i)(VI) of the Act.
one nec		The agency uses the following methods for the treatment of resources:
		The methods of the State's approved AFDC plan.
1902(1)(3)(C) of the Act		Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), in accordance with Section 1902(1)(3)(C) of the Act, as specified in Supplement 5a of ATTACHMENT 2.6-A.
1902(r)(2) of the Act		Methods more liberal than those in the State's approved AFDC plan (but not more restrictive), as described in Supplement 8b to ATTACHMENT 2.6-A.
	X	Not applicable. The agency does not consider

resources in determining eligibility.

TN No. 04-08 Supersedes TN No. 92-23

Approval Date: 08/09/04 Effective Date 07/01/04

February 1992 Page 19b

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement 1902(1)(3) and g. 2. Poverty level children under Section 1902(r)(2) of 1902(a)(10)(A)(i)(VII) the Act The agency uses the following methods for the treatment of resources: The methods of the State's approved AFDC plan. \_\_\_\_ Methods more liberal than those in the 1902(1)(3)(C) State's approved AFDC plan (but not more the Act restrictive) as specified in <u>Supplement 5a of</u> ATTACHMENT 2.6-A. \_\_\_ Methods more liberal than those in the 1902(r)(2) of the Act State's approved AFDC plan (but not more restrictive), as described in Supplement 8a to ATTACHMENT 2.6-A.

 $_{\rm X}$  Not applicable. The agency does not consider resources in determining eligibility.

TN No. 04-08Supersedes TN No. 92-23

Approval Date: 08/09/04 Effective Date: 07/01/04

Revision HCFA-PM-91-8 (MB)

October 1991

ATTACHMENT 2.6-A Page 20 OMB No.:

State/Territory: NEVADA

		<del></del>
Citation		Condition or Requirement
1905(p)(1) (C) and (D) and 1902(r)(2) of the Act	5. h.	For Qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act the agency uses the following methods for treatment of resources:  The methods of the SSI program only.  X The methods of the SSI program and/or more
		liberal methods as described in <u>Supplement 8b to</u> <u>ATTACHMENT 2.6-A.</u>
1905(s) of the Act	i.	For qualified disabled and working individuals covered under Section 1902(a)(10)(E)(ii) of the Act, the agency uses SSI program methods for the treatment of resources.
1902(u) of the	N/A	j. For COBRA continuation beneficiaries, the agency Actuses the following methods for treatment of resources:
		The methods of the SSI program only.
		More restrictive methods applied under Section 1902(f) of the Act as described in Supplement 5 to Attachment 2.6-A.

TN No. 92-9 Approval Date <u>04/16/92</u> Effective Date <u>07/01/92</u>

ATTACHMENT 2.6-A Revision: HCFA-PM-93-5 (MB) Page 20a

May 1993

State: NEVADA

Condition or Requirement Citation

1902(a)(10)(E)(iii) k. Specified low-income Medicare beneficiaries covered under Section 1902(a)(10)(E)(iii) of the of the Act

Act--

The agency uses the same method as in 5.h. of Attachment 2.6-A.

6. Resource Standard - Categorically Needy

a.1902(f) States (except as specified under items 6.c. and d. below) for aged, blind and disabled individuals:

\_\_\_\_ Same as SSI resource standards.

N/A

\_\_\_\_ More restrictive.

The resource standards for other individuals are the same as those in the related cash assistance program.

b. Non-1902(f) States (except as specified under items 6.c. and d. below)

The resource standards are the same as those in the related cash assistance program.

Supplement 8 to ATTACHMENT 2.6-A specifies for 1902(f) States the categorically needy resource levels for all covered categorically needy groups.

TN No. 93-15 Supersedes TN No. 92-09

> February 1992 Page 21

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement

1902(1)(3)(A), (B) and (C) of the Act

- c. For pregnant women and infants covered under the provisions of Section 1902(a)(10)(A)(i)(IV) and 1902(a)(10)(A)(ii)(IX) of the Act, the agency applies a resource standard.
  - Yes. Supplement 2 to ATTACHMENT 2.6-A specifies the standard which, for pregnant women, is no more restrictive than the standard under the SSI program; and for infants is no more restrictive than the standard applied in the State's approved AFDC plan.
  - $\underline{X}$  No. The agency does not apply a resource standard to these individuals.
- 1902(1)(3)(A) and (C) of the Act
- d. For children covered under the provisions of Section 1902(a)(10)(A)(i)(VI) of the Act, the agency applies a resource standard.
  - Yes. <u>Supplement 2</u> to ATTACHMENT 2.6-A specifies the standard which is no more restrictive than the standard applied in the State's approved AFDC plan.
  - X No. The agency does not apply a resource standard to these individuals.

TN No. 04-08 Supersedes TN No. 93-02

August 1991 Page 21a

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

1902 (m) (1) (C) e. For aged and disabled individuals described in and (m) (2) (B) Section 1902 (m) (1) of the Act who are covered of the Act under Section 1902 (a) (10) (A) (ii) (X) of the Act, the resource standard is:

Same as SSI resource standards.

\_\_\_\_ Same as the medically needy resource standards, which are higher than the SSI resource standards (if the State covers the medically needy).

<u>Supplement 2 to ATTACHMENT 2.6-A</u> specifies the resource levels for these individuals.

TN No. 91-22 Supersedes TN No. 87-10

May 1993 Page 22

State: NEVADA

Citation Condition or Requirement

- 7. Resource Standard Medically Needy
  - a. Resource standards are based on family size.

1902(a)(10)(C)(i) of the Act

- b. A single standard is employed in determining resource eligibility for all groups.
- \_\_\_ c. In 1902(f) States, the resource standards are more restrictive than in 7.b. above

Aged
Blind
Disabled

Supplement 2 to ATTACHMENT 2.6-A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7.c., Supplement 2 so indicates.

1905(p)(1)(D) and (p)(2)(B) of the Act

8. Resource Standard - Qualified Medicare
Beneficiaries and Specified Low-Income Medicare
Beneficiaries

For qualified Medicare beneficiaries covered under Section 1902(a)(10)(E)(i) of the Act and specified low-income Medicare beneficiaries covered under Section 1902(a)(10)(E)(iii) of the Act, the resource standard is twice the SSI standard.

1905(s) of the Act

 Resource Standard - Qualified Disabled and Working Individuals

For qualified disabled and working individuals covered under Section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individual or a couple (in the case of an individual with a spouse) is twice the SSI resource standard.

TN No. 93-15 Supersedes TN No. 91-22

October 1991 Page 22a OMB No.:

State/Territory: <a href="MEVADA">NEVADA</a>

Citation Condition or Requirement

1902(u) of the 9.1 For COBRA continuation beneficiaries, the resource

Act standard is:

N/A

\_\_\_ More restrictive standard as applied under

Supplement 8 to Attachment 2.6-A.

Section 1902(f) of the Act as described in

TN No. 92-9
Supersedes

TN No. N/A

Revision: HCFA-PM-93-5 (MB) May 1993

ATTACHMENT 2.6-A Page 23

State: <a href="MEVADA"><u>NEVADA</u></a>

Citation

Condition or Requirement

1902(u) of the Act

- 10. Excess Resources
  - a. Categorically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, and Specified Low-Income Medicare Beneficiaries

Any excess resources make the individual ineligible.

- b. Categorically Needy Only
  - N/A This State has a Section 1634 agreement with SSI. Receipt of SSI is provided for individuals while disposing of excess resources.
- c. Medically Needy

Any excess resources make the individual ineligible.

TN No. 93-15 Supersedes

Approval Date 08/23/93 Effective Date 07/01/93

August 1991 Page 24

OMB No.: 0938-

State: NEVADA

Citation Condition or Requirement

42 CFR 435.914

- 11. Effective Date of Eligibility
  - a. Groups Other Than Qualified Medicare Beneficiaries
    - (1) For the prospective period.

Coverage is available for the full month if the following individuals are eligible at any time during the month.

X Aged, blind, disabled.

X AFDC-related.

Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.

N/A \_\_\_\_ Aged, blind, disabled. \_\_\_ AFDC-related.

(2) For the retroactive period.

Coverage is available for three months before the date of application if the following individuals would have been eligible had they applied:

N/A \_\_\_\_ Aged, blind, disabled. \_\_\_ AFDC-related.

Coverage is available beginning the first day of the third month before the date of application if the following individuals would have been eligible at any time during that month, had they applied.

X Aged, blind, disabled.

X AFDC-related.

TN No. 91-22

Supersedes Approval Date 01/13/92 Effective Date 10/01/91

TN No. 89-8 & 87-10

February 1992 Page 25

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: NEVADA

## ELIGIBILITY CONDITIONS AND REQUIREMENTS

Citation(s) Condition or Requirement

1920(b)(1) of the Act N/A (3) For a presumptive eligibility for pregnant women only.

Coverage is available for ambulatory prenatal care for the period that begins on the day a qualified provider determines that a woman meets any of the income eligibility levels specified in <a href="ATTACHMENT">ATTACHMENT</a>
<a href="2.6-A">2.6-A</a> of this approved plan. If the woman files an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination of presumptive eligibility, the period ends on the day that the State agency makes the determination of eligibility based on that application. If the woman does not file an application for Medicaid by the last day of the month following the month in which the qualified provider made the determination, the period ends on that last day.</a>

1902(e)(8) and 1905(a) of the Act XX b. For qualified Medicare beneficiaries defined in Section 1905(p)(1) of the Act coverage is available beginning with the first day of the month after the month in which the individual is first determined to be a qualified Medicare beneficiary under Section 1905(p)(1). The eligibility determination is valid for--

XX 12 months
\_\_\_ 6 months
\_\_\_ months (no less than 6 months and no more than 12 months)

TN No. 92-11 Supersedes TN No. 91-22 Revision: HCFA-PM-95-1 (MB) ATTACHMENT 2.6-A
March 1995 Page 26

Condition or Requirement Citation 12. Pre-OBRA '93 Transfer of Resources -1902(a)(18) and 1902(f) of Categorically and Medically Needy, Qualified Medicare Beneficiaries, and Qualified Disabled and Working the Act Individuals The agency complies with the provisions of Section 1917 of the Act, with respect to the transfer of resources Disposal of resources at less than fair market value affects eligibility for certain services as detailed in  $\underline{\text{SUPPLEMENT 9 TO ATTACHMENT 2.6-A.}}$ 13. Transfer of Assets - All eligibility groups 1917(c) The agency complies with the provisions of Section 1917(c) of the Act, as enacted by OBRA '93, with regard to the transfer of assets. Disposal of assets at less than fair market value affects eligibility for certain services as detailed in SUPPLEMENT 9(a) and ATTACHMENT 2.6-A, except in instances where the agency determines that the transfer rules would work an undue hardship. 1917 (d) 14. Treatment of Trusts - All eligibility groups The agency complies with the provisions of Section 1917(d) of the Act, as amended by OBRA '93, with regard to trusts. The agency uses more restrictive methodologies under Section 1902(f) of the Act, and applies those methodologies in dealing with trusts; X The agency meets the requirements in Section 1917(d)(f)(B) of the Act for use of Miller The agency does not count the funds in a trust in any instance where the agency determines that the transfer would work an undue hardship, as described in SUPPLEMENT 10 TO ATTACHMENT 2.6-A.

Revision: HCFA-PM- ATTACHMENT2.6-A

Page 26a OMB No.: 0938-0673

Citation		Condition or Requirement	
1924 of the Act	15.	The agency complies with the provisions of §1924 with respect to income and resource eligibility determinations for individuals who are expected to be institutionalized for at least 30 consecutive days and who have a spouse living in the community.	
		When applying the formula used to determine the amount of resources in initial eligibility determinations, the State standard for community spouses is:	
		<u>X</u> the maximum standard permitted by law;	
		the minimum standard permitted by law; or	
		\$ a standard that is an amount between the minimum and the maximum.	

TN No.: 19-014 Approval Date: October 21, 2019 Effective Date: September 1, 2019

TN No.: <u>19-014</u> Supersedes TN No.: <u>99-03</u>