OTHER ELIGIBILITY REQUIREMENTS

RETROACTIVE ELIGIBILITY PERIOD

Description:

Medicaid is granted initially upon the determination of eligibility, based on a written application made on a "State prescribed" form. Generally the date of application is the date the signed "State prescribed" application form, or a State-approved equivalent form or process is received by the LDSS. (See **OTHER ELIGIBILITY REQUIREMENTS** APPLICATION, CERTIFICATION, RENEWAL <u>NEW APPLICATION</u>)

Paid or unpaid medical bills for the three-month period prior to the month of application may be eligible for payment/reimbursement.

Policy:

If during the three-month period prior to the month an application is filed with an LDSS, the applicant indicates that he or she has paid or unpaid medical bills, eligibility for such retroactive period must be established.

References: ADM 10 OHIP/ADM-9

Dept. Regs. 18 NYCRR 360-7.5 (a)

GISs 03 MA/025

03 MA/019 02 MA/033 98 MA/011 95 MA/032

Interpretation:

The three month retroactive period begins on the first day of the third month that precedes the month the applicant applies for assistance.

For example: If the signed application is received on April 30^{th} , the three month retroactive period is the period between January 1^{st} through March 31^{st} .

When the applicant indicates that there are unpaid medical bills in the retroactive period, eligibility for that period must be established regardless of whether the applicant applies for Medicaid only or applies for Medicaid as part of his/her application for Temporary Assistance or SSI or if the applicant is found eligible for Family Health Plus or another Medicaid Program. (See **INCOME** EARNED <u>WAGES</u>, <u>SALARIES AND CONTRACTUAL INCOME</u>)

MRG