INCOME

PERSONS IN MEDICAL FACILITIES

BUDGETING FOR INSTITUTIONALIZED SPOUSES IN SPECIFIED HOME AND COMMUNITY BASED WAIVERS (HCBS)

Policy:

Spousal budgeting procedures used for institutionalized spouses in permanent absence status who are also participants in the Traumatic Brain Injury (TBI), Nursing Home Transition and Diversion (NHTD), and Office of Mental Retardation and Developmental Disabilities (OMR-DD) Home and Community Based Service (HCBS) waivers differ from those used in all other permanent absence status situations including other HCBS waivers.

References:

SSL Sect. 366-c (4)

Dept. Reg. 360-4.9

360-4.10

ADMs 08 OLTC-01

95 ADM-19 92 ADM-32 89 ADM-47

GISs 08 MA/024

01 MA/021

Interpretation:

An institutionalized spouse as defined in the **GLOSSARY** is in permanent absence status as of the month s/he begins receiving home and community-based waivered services. For participants in the TBI, NHTD, OMR-DD HCBS waiver, spousal impoverishment eligibility rules are used to determine the waiver participant's eligibility but post eligibility/chronic care deductions are not applied.

To determine the waiver participant's eligibility for Medicaid and the amount of his/her income to be applied to the cost of care, deductions are made from the waiver A/R's income in the following order:

a) Deduct all applicable SSI-related disregards (See **INCOME** <u>SSI-RELATED DISREGARDS</u>).