

RESOURCES

MEDICAID RESOURCE LEVEL

Policy: A/Rs may retain resources up to the appropriate Medicaid Resource level, when the A/Rs are applying as or for:

- SSI-related;
- Qualified Disabled and Working Individuals (QDWIs);
- Medicaid Buy-In for Working People with Disabilities (MBI-WPD);
- COBRA continuation coverage;

The Medicaid resource levels are established according to family size, and generally change effective January each year. (See **REFERENCE MEDICAID RESOURCE LEVELS**.)

NOTE: Effective for eligibility periods beginning on or after January 1, 2010 FHPlus and non-SSI-related Medicaid A/Rs will not have resources considered in determining eligibility. This change includes the following Medicaid categories: Singles/Childless Couples (S/CC), Low Income Families (LIF), ADC-related (including adults who spend down excess income to the Medicaid income level), children under 21 years of age when comparing income to the Medicaid income level (Under age 21), and parents living with their dependent child(ren) under age 21 with income at or below the Medicaid income level (FNP Parents).

In determining eligibility, resources are never considered for pregnant women and infants under one year of age. Resources are also not considered for children over age one but under age 19.

In addition, there is no resource test for applicants for the Family Planning Benefit Program, Medicaid Cancer Treatment Program, the Medicare Savings Program including the Qualified Individual Program (QI), Qualified Medicare Beneficiaries (QMB) and Specified Low Income Medicare Beneficiaries (SLIMB), AIDS Health Insurance Program (AHIP) and policy holders who have utilized the minimum required benefits under a total asset Partnership for Long-Term Care insurance policy. (See **RESOURCES NEW YORK STATE PARTNERSHIP FOR LONG-TERM CARE**)