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# STATE PLAN PUERTO RICO

# UNDER TITLE XIX OF SOCIAL SECURITY ACT

# MEDICAL ASSISTANCE PROGRAM

**HACFA-AT-8038 (BPP)**
**MAY 22, 1980**

# SECTION 2 - Coverage and Eligibility


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OFFICIAL

OMB No. 0938-0193

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Revision: HCFA-PM-91-4(BPD)
AUGUST1991

OMB No.: 0938-

Territory: Puerto Rico

SECTION 2 - COVERAGE AND ELIGIBILITY

Citation
42 CFR Part 436, §436.10 and Subpart J

2.1 Application, Determination of Eligibility and Furnishing Medicaid

(a) The Medicaid agency meets all requirements of 42 CFR Part 436, Subpart J for processing applications, determining eligibility, and furnishing Medicaid.

OFFICIAL



Revision: HCFA-PM- (MB)

State/Territory: [Puerto Rico]

| Citation | | |
|---|---|---|
| 42 CFR 436 Subpart J. | 2.1(b) (1) | Except as provided in items 2.1(b)(2) and (3) below, individuals are entitled to Medicaid services under the plan during the three months preceding the month of application, if they were, or on application would have been, eligible. The effective date of prospective and retroactive eligibility is specified in Attachment 2.6-A.<br><br>__x__ For any full month provided the individual met all the eligibility conditions at any time during that month. |
| 1902(e)(8) and 1905(a) of the Act | _____ (2) | For individuals who are eligible for Medicare cost-sharing expenses as qualified Medicare beneficiaries under section 1902(a)(10)(E)(i) of the Act, coverage is available for services furnished after the end of the month which the individual is first determined to be a qualified Medicare beneficiary. Attachment 2.6-A specifies the requirements for determination of eligibility for this group.<br><br>__x__ Not applicable |
| 1902(a)(47) and 1920 of the Act | _____(3) | Pregnant women are entitled to ambulatory prenatal care under the plan during a presumptive eligibility period in accordance with section 1920 of the Act. Attachment 2.6-A specifies the requirements for determination of eligibility for this group.<br><br>__x__ Not applicable |

Revision: HCFA-PM-93-5 (MB)
MAY 1993
Territory: Puerto Rico

| Citation | | |
|---|---|---|
| 42 CFR Part 436, Subpart J | 2.1(b)(1) | Except as provided in items 2.1(b)(2) and (3) below, individuals are entitled to Medicaid services under the plan during the 3 months preceding the month of application if they were, or on application would have been, eligible. Coverage is provided:<br><br>___ At each time services were received during the 3-month period provided the individual met all the eligibility requirements at that time.<br><br>_X_ For any full month provided the individual met all the eligibility conditions at any time during that month. |
| 1902(e)(8) and 1905(a) of the Act | ___ (2) | For individuals who are eligible for Medicare cost-sharing expenses as qualified Medicare beneficiaries under section 1902(a)(10)(E)(i) of the Act, coverage is available for services furnished after the end of the month in which the individual is first determined to be a qualified Medicare beneficiary. ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group. NOT APPLICABLE |
| 1920 of the Act | ___ (3) | Pregnant women are entitled to ambulatory prenatal care under the plan during a presumptive eligibility period in accordance with section 1920 of the Act. NOT APPLICABLE<br><br>ATTACHMENT 2.6-A specifies the requirements for determination of eligibility for this group. |

42 CFR 434.20 (c) The Medicaid agency elects to enter into a risk contract with an HMO that is--

___ Qualified under title XIII of the Public Health Service Act or is provisionally qualified as an HMO pursuant to section 1903(m)(3) of the Social Security Act.

_X_ Not Federally qualified, but meets the requirements of 42 CFR 434.20(c) and is defined in ATTACHMENT 2.1-A.

___ Not applicable.

Revision: HCFA-PM-91- 6 (MB)
September 1991

OMB No.

State/Territory: Puerto Rico

Citation

1902(a)(55) of the Act

2.1(d) The Medicaid agency has procedures to take applications, assist applicants, and perform initial processing of applications from those low income pregnant women, infants, and children under age 19, described in §1902(a)(10)(A)(i)(IV), (a)(10)(A)(i)(VI), (a)(10)(A)(i)(VII), and (a)(10)(A)(ii)(IX) at locations other than those used by the title IV-A program including FQHCs and disproportionate share hospitals. Such application forms do not include the ADFC form except as permitted by HCFA instructions.

Not Applicable

Puerto Rico does not cover poverty level persons.



☆ U.S. Government Printing Office : 1991 - 281-878/40326

Revision: HCFA-PM-91-4 (BPD) OMB No.: 0938-
AUGUST 1991

Territory: Puerto Rico

Citation
42 CFR 436.10

2.2 Coverage and Conditions of Eligibility

Medicaid is available to the groups specified in ATTACHMENT 2.2-A.

/_/ Mandatory categorically needy and other required special groups only.

/_/ Mandatory categorically needy, other required special groups, and specified optional groups.

/X/ Mandatory categorically needy, other required special groups, specified optional groups, and the medically needy.

The conditions of eligibility that must be met are specified in ATTACHMENT 2.6-A.

1902(a)(10)(A) & (E), 1902(l) & (m), 1905(p) and (q) and 1920 of the Act

All applicable requirements of 42 CFR Part 436 and sections 1902(a)(10)(A)(i)(IV), (V), and (VI), 1902(a)(10)(A)(ii)(IX), 1902(a)(10)(E), 1902(l) and (m), 1905(p), (q) and (s), and 1920 of the Act are met.

Revision: HCFA-PM-91-4 (BPD) OMB No.: 0938-
AUGUST 1991

Territory: Puerto Rico

| Citation | | |
|---|---|---|
| 436.10 and 436.403, and 1902(b) of the Act, P.L. 99-272 (Section 9529) and P.L. 99-509 (Section 9405) | 2.3 | Residence<br><br>Medicaid is furnished to eligible individuals who are residents of the State under 42 CFR 436.403, regardless of whether or not the individuals maintain the residence permanently or maintain it at a fixed address. |

| Citation | | |
|---|---|---|
| 42 CFR 436.530(b) 42 CFR 436.531 | 2.4 | Blindness<br><br>All of the requirements of 42 CFR 436.530 and 42 CFR 436.531 are met. The definition of blindness in terms of ophthalmic measurement used in this plan is specified in Supplement 2 to ATTACHMENT 2.2-A. |

| Citation | | |
|---|---|---|
| 42 CFR 436.540(b) 436.541 | 2.5 | Disability<br><br>All of the requirements of 42 CFR 436.540 and 42 CFR 436.541 are met. The definition of permanent and total disability that is used in this plan is specified in Supplement 2 to ATTACHMENT 2.2-A. |

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Territory: *Puerto Rico*

Citation

## 2.6 Financial Eligibility

42 CFR Part 436, Subparts A,G, and H

(a) The financial eligibility conditions for the Medicaid only eligibility groups and persons deemed to be cash assistance recipients are described in ATTACHMENT 2.6-A.

1902(a)(10)(E)(i) and 1905(p)(4) of the Act

(b) Qualified Medicare Beneficiaries

The financial eligibility requirements for qualified Medicare beneficiaries are described in ATTACHMENT 2.6-A.

X Not applicable. Qualified Medicare beneficiaries are not included in the plan.

1902(a)(10)(E)(ii), 1905(p)(4) and 1905(s) of the Act

(c) Qualified Disabled and Working Individuals

The financial eligibility requirements for qualified disabled and working individuals are described in ATTACHMENT 2.6-A.

X Not applicable. Qualified disabled and working individuals are not included in the plan.

1902(a)(10)(E)(iii) and 1905(p)(4) of the Act

(d) Specified Low-Income Medicare Beneficiaries

The financial eligibility requirements for specified low-income Medicare beneficiaries are described in ATTACHMENT 2.6-A.

X Not applicable. Specified low-income Medicare beneficiaries are not included in the plan.

Revision: HCFA-PM-92-1 (MB)
FEBRUARY 1992

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

2.6 Financial Eligibility

42 CFR Part 436, 436.10 and Subparts G & H

1902(a)(10)(A)(i) (III), (IV), (V), (VI) and (VII), 1902(a)(10)(A)(ii) (IX), 1902(a)(10)(A)(ii)(X) 1902(a)(10)(C), 1902(f) 1902(l) and (m), 1905(p), 1902(r)(2), and 1920 of the Act

(a) The financial eligibility conditions for the Medicaid-only eligibility groups and persons deemed to be cash assistance recipients are persons deemed to be cash assistance recipients are described in ATTACHMENT 2.6-A.

1902(a)(10)(E)(i) and 1905(p) of the Act

(b) Qualified Medicare beneficiaries.

All requirements of section 1905(p) of the Act are met with respect to qualified Medicare beneficiaries. The level of income and resources, expressed in total dollar amounts, that are used as a basis for establishing eligibility under the plan are as described in ATTACHMENT 2.6-A.

X Not applicable. Qualified Medicare beneficiaries are not included in the plan.

1902(a)(10)(E)(ii) and 1905(s) of the Act

(c) Qualified Disabled and Working Individuals

All requirements of section 1905(s) of the Act are met with respect to qualified disabled and working individuals.

X Not applicable. Qualified disabled and working individuals are not included in the plan.

BPP Revision: November 10, 1981

State Puerto Rico

| Citation | | |
|---|---|---|
| 42 CFR Part 436, §436.10 and Subpart G &I<br>AT-78-90<br>AT-80-6<br>AT-80-34<br>AT-81-4<br>46 FR 47976 | 2.6(b) | Medically needy.<br><br>/X/ All requirements of 42 CFR Part 436, Subparts G and I are met with respect to the families and individuals to whom the requirements apply. The levels of income and resources, expressed in total dollar amounts, that are used as a basis for establishing eligibility under the plan are described in ATTACHMENT 2.6-A.<br><br>/ / Not applicable. The medically needy are not included under this plan. |

OFFICIAL

Revision: HCFA-PM-86-20 (BERC)
SEPTEMBER 1986

OMB-No. 0938-0193

State/Territory: PUERTO RICO

| Citation | 2.7 | Medicaid Furnished Out of State |
|---|---|---|
| 431.52 and 1902(b) of the Act, P.L. 99-272 (Section 9529) | | Medicaid is furnished under the conditions specified in 42 CFR 431.52 to an eligible individual who is a resident of the State while the individual is in another State, to the same extent that Medicaid is furnished to residents in the State. |

Revision: HCFA-AT-82-15(BPP)
July 1982

State Puerto Rico

Citation
42 CFR 431.52
AT-78-90
AT-80-34
47 FR 28652

2.7 Medicaid Furnished out of State

Medicaid is furnished under the conditions specified in 42 CFR 431.52 to:

(a) An eligible individual who is a resident of the State while the individual is in another State, to the same extent that Medicaid is furnished to residents in the State; and

(b) A child for whom the State makes adoption assistance or foster care maintenance payments under title IV-E of the Act.

# LIST OF ATTACHMENTS THE SECTION 2

| NO. | Title of Attachments<br>Ref. List of Attachments Official Approval May 1, 1992 |
|---|---|
| 2.1-A | Definition of an HMO that Is Not Federally Qualified |
| 2.1-A | Managed Health Care State Plan Defined HMO (Approval April 19, 1994) |
| *2.2-A | Groups Covered and Agencies Responsible for Eligibility Determinations<br>* Supplement 1 – Reasonable Classifications of Individuals under the Age of 21, 20, 19 and 18<br>* Supplement 2 – Definitions of Blindness and Disability (Territories Only)<br>* Supplement 3 – Method of Determining Cost Effectiveness of Caring for Certain Disabled Children at Home |
| *2.6-A | Eligibility Conditions and Requirements (States only) |

* Supplement 1 — Income Eligibility Levels – Categorically Needy, Medically Needy and Qualified Medicare Beneficiaries

* Supplement 2 — Resource Levels - Categorically Needy, Including Group with Income Up to a Percentage of the Federal Poverty Level, Medically Needy, and Other Optional Groups

* Supplement 3 — Reasonable Limits on Amounts for Necessary Medical or Remedial Care Not Covered under Medicaid

* Supplement 4 — Section 1902 (f) Methodologies for Treatment of Income that Differ from those of the SSI Program

* Supplement 5 — Section 1902 (f) Methodologies for Treatment of Resources that Differ from those of the SSI Program

* Supplement 5a — Section 1902 (f) Methodologies for Treatment of Resources for Individuals with Incomes Up to a Percentage of the Federal Poverty Level

* Supplement 6 — Standards for Optional State Supplementary Payments

* Supplement 7—Income Levels for 1902 (f) State - Categorically Needy Who Are covered under Requirements More Restrictive than SSI

* Supplement 8 — Resource Standards for 1902 (f) State - Categorically Needy

* Supplement 8a — More Liberal Methods of Treating Income Under Section 1902 (r) (2) of the Act

* Supplement 8b — More Liberal Methods of Treating Resources Under Section 1902 (r) (2) of the Act

* Supplement 9 — Transfer of Resources

* Supplement 10 — Consideration of Medicaid Qualifying Trusts- - undue Hardship

* Supplement 11 — Cost – Effective Methods for COBRA Groups (State and Territories)

## *2.6-A Eligibility Conditions and Requirements (Territories only)

* Supplement 1 — Income Eligibility Levels – Categorically Needy, Medically Needy and Qualified Medicare Beneficiaries

* Supplement 2 — Reasonable Limits on Amounts for Necessary Medical or Remedial Care Not Covered under Medicaid

* Supplement 3 — Resource Levels for Optional Groups with Incomes Up to a Percentage of the Federal Poverty Level and Medically Needy

* Supplement 4 – Consideration of Medicaid Qualifying Trusts- - undue Hardship

* Supplement 5 – More Liberal Methods of Treating Income Under Section 1902 (r) (2) of the Act

* Supplement 6 – More Liberal Methods of Treating Resources Under Section 1902 (r) (2) of the Act

Supplement 8A – Less Restrictive Methods of Treating Income under Section 1902 (r) (2) of the Act (Approved on April 28, 2006) (AMMENDED ON May 10, 2007)

Supplement 9 – State Plan under Title XIX of the Social Security Act Transfer of Resources

Supplement 11– Condition or Requirement Cost Effectiveness Methodology for Cobra Continuation Beneficiaries under Section 1902 (u) of the Act

* Forms Provided

COMMONWEALTH OF PUERTO RICO
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

MANAGED HEALTH CARE

STATE PLAN DEFINED HMO

The Puerto Rico Health Insurance Administration (PRHIA) was created by Commonwealth Law Number 72 effective September 7, 1993. PRHIA is a public corporation with full autonomy. It is responsible for implementing, administering and negotiating a health insurance system, through contracts with insurance underwriters that will eventually give all Island residents access to quality medical and hospital care, regardless of their financial condition and capacity to pay.

PRHIA has an agreement with the single State Medicaid Agency to carry out the provisions of Law Number 72. The Single State Medicaid Agency is the Department of Health. Within the Department, the Office of Economic Aid to the Medically Indigent has responsibility for the Medicaid Program.

PRHIA enters into risk contracts with entities/insurers organized under Commonwealth Law 152 (approved on May 9, 1942) to provide or arrange for comprehensive health care services. These consist of Basic Coverage and Special Coverage as detailed in the contract.

PRHIA contracts health insurance for one or more areas or regions, with one or more entities/insurers licensed to do health insurance business in Puerto Rico. Services are rendered following the regionalization system of the Department of Health, progressively establishing a newtwork of participating purveyors throughout the Island. Within each region Primary Care Centers will be established. These must be staffed with consideration to the morbidity and mortality rates of the specific health area and must be sufficiently staffed to provide all the benefits included in the Plan. The entity/insurer must demonstrate to PRHIA the adequacy of its provider network in relation to the region or health area it will serve. Services will be as accessible to Medicaid enrollees as they are to non-enrolled Medicaid beneficiaries.

The entity/insurer must demonstrate financial soundness according to Commonwealth statute, etc., and must submit financial and other reports to the Administration as specified in the contract. If the entity or insurer is declared insolvent, files for bankruptcy, or is placed under liquidation, the Administration has the option to cancel and inmmediately terminate the contract. In the event that the entity or insurer is declared insolvent, files for bankruptcy, or is placed under liquidation, Medicaid enrollees will not be liable for its debts. The entity/insurer must guarantee to the Administration that the premium constitutes payment in full for the benefits under the program and that participating providers and/or their subcontractors cannot collect any additional amount from the beneficiaries.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

GROUPS COVERED AND AGENCIES RESPONSIBLE FOR ELIGIBILITY DETERMINATION

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

The following groups are covered under this plan.

A. Mandatory Coverage - Categorically Needy

42 CFR 436.110

DSS

1. All recipients of OAA, AB, APTD, AABD, and AFDC: this includes all individuals who are essential persons under the State plan and who could be recipients if the State plan were as broad as permitted for Federal financial participation. Also included are groups checked below which are covered under the approved State plan for financial assistance.

   ___ AFDC pregnant women with no other eligible children.

   X AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.

   The standards for OAA, AB, APTD, AABD and AFDC payments are listed in Supplement 1 of ATTACHMENT 2.6-A.

   The definitions of blindness in terms of ophthalmic measurement and of permanent and total disability used in this plan are specified in Supplement 2 to ATTACHMENT 2.2-A.

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | A. Mandatory Coverage - Categorically Needy (Continued) |
| | 42 CFR 436.111<br>1902(a)(17)(D)<br>of the Act | 2. a. Individuals denied AFDC because of policies requiring the deeming of income and resources from certain persons not included as financially responsible relatives under section 1902(a)(17)(D) of the Act: |
| DSS | | (1) Stepparents who are not legally liable for support of stepchildren under a State law of general applicability; |
| | | (2) Grandparents; |
| | | (3) Legal guardians; |
| | | (4) Individual alien sponsors (who are not spouses of the individual or the individual's parent); and |
| | | (5) Siblings. |
| | | b. Individuals denied AFDC because of the involuntary inclusion of all eligible siblings in the home as members of the AFDC filing unit. |

Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

A. Mandatory Coverage - Categorically Needy (Continued)

42 CFR 436.112

3. Individuals who would be eligible for OAA, AB, APTD, AABD, or AFDC, except for the increase in OASDI benefits under P.L. 92-336 (July 1, 1972), who were entitled to OASDI in August 1972, and who were receiving OAA, AB, APTD, or AFDC in August 1972.

DSS

___ Includes persons who would have been eligible for cash assistance but had not applied in August 1972 (this group was included in this State's August 1972 plan).

X Includes persons who would have been eligible for cash assistance in August 1972 if not in a medical institution or intermediate care facility (this group was included in this State's August 1972 plan).

X Not applicable with respect to intermediate care facilities; the State did or does not cover this service.

42 CFR 436.114

4. Deemed Recipients of AFDC

a. Individuals denied a title IV-A cash payment solely because the amount would be less than $10.

DSS

___ b. Participants in a work supplementation program under title IV-A and any child or relative of such individual (or other individual living in the same household as such individuals) who would be eligible for AFDC if there were no work supplementation program.

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | A. Mandatory Coverage - Categorically Needy (Continued) |
| DSS | 402(a)(22)(A) of the Act | c. Individuals whose AFDC payments are reduced to zero by reason of recovery of overpayment of AFDC funds. |
| | 406(h) and 1902(a)(10)(A)(i)(I) of the Act | d. An assistance unit deemed to be receiving AFDC for a period of four calendar months because the family becomes ineligible for AFDC as a result of collection or increased collection of support and meets the requirements of section 406(h) of the Act. |
| | 1902(a) of the Act | e. Individuals deemed to be receiving AFDC who meet the requirements of section 473(b)(1) or (2) for whom an adoption assistance agreement is in effect or foster care maintenance payments are being made under title IV-E of the Act. |
| DSS | 407(b), 1902(a)(10)(A)(i) and 1905(m)(1) of the Act | f. Effective October 1, 1990, qualified family members who would be eligible to receive AFDC under section 407 of the Act because the principal wage earner is unemployed. |
| | 42 CFR 436.116 | 5. Families terminated from AFDC solely because of increased earnings or hours of employment, provided the family received AFDC in at least three months during the six-month period immediately preceding the month in which ineligibility began and provided that one member of the family is employed throughout the period specified in the next sentence. Medicaid is provided for four calendar months beginning with the month AFDC is terminated or, if AFDC is terminated retroactively, with the first month in which AFDC was erroneously paid. |

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

## COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation (s) | | Groups Covered |
|---|---|---|
| | | A. Mandatory Coverage - Categorrically Needy and Other Required Special Groups (continued) |
| 1902(a)(10)(A)(I)(IV)and 1902(1)(1)(A) and (B) of the Act | Not applicable | 8. Pregnant women and infants under 1 year of age with family incomes up to 133 percent of the Federal poverty level who are described in section 1902 (a)(10)(A)(I)(IV) and 1902 (1) (1)(A) and (B) of the Act. The income levvel for this group is specified in Supplement to ATTACHMENT 2.6-A.<br><br>- The State uses a percentage greater than 133 but not more than 185 percent of the Federal poverty level, as established in its State plan, State legislation, or State appropriations as of December 19, 1989. |
| | | 9. Children: |
| 1902(a)(10)(A)(I)(VI) 1902 (I)(I)(C) of the Act | Not applicable | a. who have attained 1 year of age but have and not attained 6 years of age, with family incomes at or below 133 percent of the Federal poverty levels. |
| 1902 (a)(10)(A)(1)(VII) and 1902(1)(1)(D) of the Act | | b. born after September 30, 1983 who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty levels.<br><br>- Children born after (specify optional earlier date) who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty levels. |

Income levels for these groups are specified in Supplement 1 to ATTACHMENT 2.6A



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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | A. Mandatory Coverage - Categorically Needy (Continued) |
| 1902(a)(10)(A)(i)(III) and 1905(n) of the Act | 6. Qualified pregnant women and children. |
| | a. A pregnant woman whose pregnancy has been medically verified who-- |
| | (1) Would be eligible for an AFDC cash payment (or who would be eligible if the State had an AFDC unemployed parents program) if the child had been born and was living with her; |
| | (2) Is a member of a family that would be eligible for aid to families with dependent children of unemployed parents if the State had an AFDC-unemployed parents program; or |
| | (3) Would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan. |
| 1902(a)(10)(A)(i)(III) and 1905(n) of the Act | b. Children born after September 30, 1983 who are under age 19 and who would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan. |
| | ___ Children who are born after _____ (Specify optional earlier date) who are under age 19 and who would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan. |

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| 1902(e)(5) of the Act | 7. A woman who, while pregnant, was eligible and applied for, and receives Medicaid under the approved State plan on the day her pregnancy ends. The woman continues to be eligible, as though she were pregnant, for all pregnancy-related and postpartum medical assistance for a 60-day period (beginning on the last day of pregnancy) and for any remaining days in the month in which the 60th day falls. |

# Medicaid Eligibility

OMB Control Number 0938-1148
OMB Expiration date: 10/31/2014

**Eligibility Groups - Mandatory Coverage**
**Adult Group** **S32**

1902(a)(10)(A)(i)(VIII)
42 CFR 435.119

The state covers the Adult Group as described at 42 CFR 435.119.

◉ Yes ○ No

☒ **Adult Group** - Non-pregnant individuals age 19 through 64, not otherwise mandatorily eligible, with income at or below 133% FPL.

☑ The state attests that it operates this eligibility group in accordance with the following provisions:

☒ Individuals qualifying under this eligibility group must meet the following criteria:

☒ Have attained age 19 but not age 65.

☒ Are not pregnant.

☒ Are not entitled to or enrolled for Part A or B Medicare benefits.

☒ Are not otherwise eligible for and enrolled for mandatory coverage under the state plan in accordance with 42 CFR 435, subpart B.

Note: In 209(b) states, individuals receiving SSI or deemed to be receiving SSI who do not qualify for mandatory Medicaid eligibility due to more restrictive requirements may qualify for this eligibility group if otherwise eligible.

☒ Have household income at or below 133% FPL.

☒ MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

☒ There is no resource test for this eligibility group.

☒ Parents or other caretaker relatives living with a child under the age specified below are not covered unless the child is receiving benefits under Medicaid, CHIP or through the Exchange, or otherwise enrolled in minimum essential coverage, as defined in 42 CFR 435.4.

○ Under age 19, or

◉ A higher age of children, if any, covered under 42 CFR 435.222 on March 23, 2010:

○ Under age 20

◉ Under age 21

☒ Presumptive Eligibility

The state covers individuals under this group when determined presumptively eligible by a qualified entity. The state assures it also covers individuals under the Pregnant Women (42 CFR 435.116) and/or Infants and Children under Age 19 (42 CFR 435.118) eligibility groups when determined presumptively eligible.

○ Yes ◉ No

PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

TERRITORY: Puerto Rico

| Agency | Citation(s) | Groups Covered |
|---|---|---|

A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued)

1902(a)(10)(A)(i)(VIII)
1902(k)(2)

13. Option to Provide Coverage to the Lowest Income Population that Becomes Mandatory in 2014.

Individuals who are under 65 years of age, not pregnant, not entitled to, or enrolled for, benefits under Part A of title XVIII, or enrolled for benefits under Part B of title XVIII, and not described in 1902(a)(10)(A)(i)(I) through 1902(a)(10)(A)(i)(VII) of the Act.

X The agency elects to make individuals described above eligible under the early option set forth in section 1902(k)(2) of the Act. The effective date for coverage of this group under the early option is October 1, 2011 (cannot be earlier than April 1, 2010).

The income standard applicable to individuals eligible under this early option is $400 per month or less (cannot exceed 133 percent of FPL).
NOTE: No resource test is applicable to this group.

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TERRITORY: Puerto Rico

| AgencyCitation(s) | Groups Covered |
|---|---|

A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued)

1902(a)(10)(A)(i)(VIII)
1902(k)(2)

13. Option to Provide Coverage to the Lowest Income Population that Becomes Mandatory in 2014.

Individuals who are under 65 years of age, not pregnant, not entitled to, or enrolled for, benefits under Part A of title XVIII, or enrolled for benefits under Part B of title XVIII, and not described in 1902(a)(10)(A)(i)(I) through 1902(a)(10)(A)(i)(VII) of the Act.

X The agency elects to make individuals described above eligible under the early option set forth in section 1902(k)(2) of the Act. The effective date for coverage of this group under the early option is July 1, 2011 (cannot be earlier than April 1, 2010).

The income standard applicable to individuals eligible under this early option is $400 per month or less (cannot exceed 133 percent of FPL).
NOTE: No resource test is applicable to this group.

OFFICIAL



TERRITORY: Puerto Rico

| Agency | Citation(s) | Groups Covered |
|---|---|---|

A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

In determining whether an individual's income is at or below the Territory's income standard for this group, the Territory will use the following methodology:

**Choose One:**

___ The income rules applicable to the aged, blind and disabled.

___ The income rules applicable to the aged, blind and disabled, and the following less restrictive income disregards and exclusions than are applicable to the aged, blind and disabled.

X A methodology based on rules other than those applicable to the aged, blind and disabled. The methodology the Territory will use is described below.

Puerto Rico's methodology for determining whether an individual meets the income requirements is made in accordance with the Puerto Rico Medicaid Regulation. Individuals are instructed to bring certain documentation related to their income when applying for Medicaid benefits.

The Medicaid Office considers the following types of income that is available or will be available in the next twelve (12) months: (i) wages, (ii) pensions, (iii) financial assistance from relatives living outside the home, (iv) business profits, (v) dividends and interest, (vi) income derived from renting property, (vii) lottery earnings, (viii) money obtained from livestock, (ix) unemployment compensation, (x) worker's compensation, (xi) compensation from the Insurance Fund Corporation of the State, (xii) non-occupational temporary disability insurance from the Department of Labor and Human Resources,

OFFICIAL



TERRITORY: Puerto Rico

| Agency | Citation(s) | Groups Covered |
|---|---|---|

A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

and (xiii) any other amount of money received regularly that is not exempt (as described below). The Medicaid Office also makes certain deductions from the total income. Specifically (a) $10 for each child attending school, (b) the amount of expenses for regular assistance for persons living outside the home for which the individual is legally responsible, and (c) the monthly amount paid for supplemental health insurance for any member of the family unit.

The following income is exempt from income eligibility determinations: (i) special monthly pension as certified from the veterans administration, (ii) TANF income, (iii) loans under Title III of the Economic Opportunity Act, (iv) income earned by children under 14 years old, (v) stipends received from volunteer programs (vi) Christmas bonus, (vii) income earned by employees from Vespra or Vista Programs, (viii) Nutrition Assistance Program benefits, (ix) revenue from grants and student loans, (x) any help received from civic clubs such as Rotary or Lions Club or other entities, (xi) the payment of thirty dollars ($30) by way of monthly incentive payments to cover the expenses of the participants assigned training activities of the Workforce Investment Act (WIA), (xii) monetary gifts, (xiii) loan disbursements that are unavailable for use, (xiv) disaster relief air, (xv) the insurance payments for end of life and burial services, (xvi) returns of income tax paid in excess, (xvii) the value of harvested food for consumption by the household, (xviii) amounts paid by the Department of Family to foster parents for the care of minors subsidies, (xix) amounts paid to individuals and / or families through the Federal Housing Program, (xxi) income received from insurance plans for living expenses while in the hospital, (xxii) court-ordered amounts that are held for a child, and (xxiii) incentives, subsidies and supplements to receive the applicant or participant to a farmer for use in the harvest.

OFFICIAL



TERRITORY : Puerto Rico

| AgencyCitation(s) | Groups Covered |
|---|---|

A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

In determining whether an individual's income is at or below the Territory's income standard for this group, the Territory will use the following methodology:

**Choose One:**

___ The income rules applicable to the aged, blind and disabled.

___ The income rules applicable to the aged, blind and disabled, and the following less restrictive income disregards and exclusions than are applicable to the aged, blind and disabled.

X A methodology based on rules other than those applicable to the aged, blind and disabled. The methodology the Territory will use is described below.

Puerto Rico's methodology for determining whether an individual meets the income requirements is made in accordance with the Puerto Rico Medicaid Regulation. Individuals are instructed to bring certain documentation related to their income when applying for Medicaid benefits.

The Medicaid Office considers the following types of income that is available or will be



According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-_____. The time required to complete this information collection is estimated to average 2 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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TERRITORY : Puerto Rico

| AgencyCitation(s) | Groups Covered |
|---|---|

available in the next twelve (12) months: (i) wages, (ii) pensions, (iii) financial assistance from relatives living outside the home, (iv) business profits, (v) dividends and interest, (vi) income derived from renting property, (vii) lottery earnings, (viii) money obtained from livestock, (ix) unemployment compensation, (x) worker's compensation, (xi) compensation from the Insurance Fund Corporation of the State, (xii) non-occupational temporary disability insurance from the Department of Labor and Human Resources, and (xiii) any other amount of money received regularly that is not exempt (as described below). The Medicaid Office also makes certain deductions from the total income. Specifically (a) $10 for each child attending school, (b) the amount of expenses for regular assistance for persons living outside the home for which the individual is legally responsible, and (c) the monthly amount paid for supplemental health insurance for any member of the family unit.

The following income is exempt from income eligibility determinations: (i) special monthly pension as certified from the veterans administration, (ii) TANF income, (iii) loans under Title III of the Economic Opportunity Act, (iv) income earned by children under 14 years old, (v) stipends received from volunteer programs (vi) Christmas bonus, (vii) income earned by employees from Vespra or Vista Programs, (viii) Nutrition Assistance Program benefits, (ix) revenue from grants and student loans, (x) any help received from civic clubs such as Rotary or Lions Club or other entities, (xi) the payment of thirty dollars ($30) by way of monthly incentive payments to cover the expenses of the participants assigned training activities of the Workforce Investment Act (WIA), (xii) monetary gifts, (xiii) loan disbursements that are unavailable for use, (xiv) disaster relief air, (xv) the insurance payments for end of life and burial services, (xvi) returns of income tax paid in excess, (xvii) the value of harvested food for consumption by the household, (xviii) amounts paid by the Department of Family to foster parents for the care of minors subsidies, (xix) amounts paid to individuals and / or families through the Federal Housing Program, (xxi) income received from insurance plans for living expenses while in the hospital, (xxii) court-ordered amounts that are held for a child, and (xxiii) incentives, subsidies and supplements to receive the applicant or participant to a farmer for use in the harvest.



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CMS - _____ (mm/yyyy)

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | A. Mandatory Coverage - Categorically Needy (Continued) |
| 1902(e)(4) of the Act | 8. A child born to a woman who is eligible for and receiving Medicaid on the date of the child's birth. The child is deemed eligible for one year from birth as long as the mother remains eligible or would have remained eligible if still pregnant and the child remains in the same household as the mother. |
| 1902(e)(6) | 9. A pregnant woman who would otherwise lose eligibility during the pregnancy or the postpartum period because of an increase in income. |
| | B. Optional Groups Other Than the Medically Needy |
| 42 CFR 436.210 | X 1. Individuals described below who meet the income and resource requirements of OAA, AB, APTD, AABD, or AFDC, but who do not receive cash assistance. |
| | X The State covers all individuals as described above. |
| | ___ The State covers only the following group or groups of individuals: |
| 1902(a)(10)(A)(ii) and 1905(a) of the Act | ___ Aged<br>___ Blind<br>___ Disabled<br>___ Caretaker relatives<br>___ Pregnant women |
| 42 CFR 436.211 | X 2. Individuals who would be eligible for OAA, AB, APTD, AABD, or AFDC, if they were not in a medical institution. |
| | X The State covers all individuals as described above. |

Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other than Medically Needy (Continued)

3. Individuals who would be eligible for OAA, AB, APTD, AABD, or AFDC if coverage under the State's plan for these programs were as broad as permitted under the Act:

___ Individuals meeting a broader definition of permanent and total disability.

___ Individuals meeting a broader definition of blindness.

___ Others, as specified below:

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other than Medically Needy (Continued)

1902(e)(2) of the Act, P.L. 99-272 (Sec. 9517) and P.L. 100-203 (Sec. 4113(d)) ☐

4. The State deems as eligible those individuals who become otherwise ineligible for Medicaid while enrolled in an HMO qualified under title XIII of the Public Health Service Act or while enrolled in an entity described in sections 1903(m)(2)(B)(iii), (E), or (G) or section 1903(m)(6) of the Act., but who have been enrolled in the HMO or entity for less than the minimum enrollment period listed below. The HMO or entity must have a risk contract as specified in 42 CFR 434.20(a). Coverage under this section is limited to HMO services and family planning services described in section 1905(a)(4)(C) of the Act.

The minimum enrollment period is _____ (not to exceed six months).

The State measures the minimum enrollment period from:

☐ The date beginning the period of enrollment in the HMO or other entity, without any intervening disenrollment, regardless of Medicaid eligibility.

☐ The date beginning the period of enrollment in the HMO as a Medicaid patient (including periods when payment is made under this section), without any intervening disenrollment.

State/Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| 1634(d) of the Act | | A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued) |

24. Disabled widows, disabled widowers, and disabled unmarried divorced spouses who had been married to the insured individual for a period of at least ten years before the divorce became effective, who have attained the age of 50, who are receiving title II payments, and who because of the receipt of title II income lost eligibility for SSI or SSP which they received in the month prior to the month in which they began to receive title II payments, who would be eligible for SSI or SSP if the amount of the title II benefit were not counted as income, and who are not entitled to Medicare Part A.

____ The State applies more restrictive eligibility requirements for its blind or disabled than those of the SSI program.

____ In determining eligibility as categorically needy, the State disregards the amount of the title II benefits identified in § 1634(d)(1)(A) in determining the income of the individual, but does not disregard any more of this income than would reduce the individual's income to the SSI income standard.

____ In determining eligibility as categorically needy, the State disregards only part of the amount of the benefits identified in §1634(d)(1)(A) in determining the income of the individual, which amount would not reduce the individual's income below the SSI income standard. The amount of these benefits to disregarded is specified in Supplement 4 to Attachment 2.6-A.

____ In determining eligibility as categorically needy, the State chooses not to deduct any of the benefit identified in § 1634(d)(1)(A) in determining the income of the individual.

Not Applicable

*Agency that determines eligibility for coverage.

State: [Puerto Rico]

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other Than the Medically Needy (Continued)

42 CFR 435.212 & 1902(e)(2) of the Act, P.L. 99-272 (section 9517) P.L. 101-508 (section 4732)

[ ] 3. The State deems as eligible those individuals who became otherwise ineligible for Medicaid while enrolled in an HMO qualified under Title XIII of the Public Health Service Act, or a managed care organization (MCO), or a primary care case management (PCCM) program, but who have been enrolled in the entity for less than the minimum enrollment period listed below. Coverage under this section is limited to MCO or PCCM services and family planning services described in section 1905(a)(4)(C) of the Act.

___ The State elects not to guarantee eligibility.

___ The State elects to guarantee eligibility. The minimum enrollment period is ____ months (not to exceed six).

The State measures the minimum enrollment period from:

[ ] The date beginning the period of enrollment in the MCO or PCCM, without any intervening disenrollment, regardless of Medicaid eligibility.

[ ] The date beginning the period of enrollment in the MCO or PCCM as a Medicaid patient (including periods when payment is made under this section), without any intervening disenrollment.

[ ] The date beginning the last period of enrollment in the MCO or PCCM as a Medicaid patient (not including periods when payment is made under this section) without any intervening disenrollment or periods of enrollment as a privately paying patient. (A new minimum enrollment period begins each time the individual becomes Medicaid eligible other than under this section).

*Agency that determines eligibility for coverage.

___x___ Not Applicable

State: [Puerto Rico]

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | B. | Optional Groups Other Than Medically Needy continued) |
| | 1932(a)(4) of Act | The Medicaid Agency may elect to restrict the disenrollment of Medicaid enrollees of MCOs, PIHPs, PAHPs, and PCCMs in accordance with the regulations at 42 CFR 438.56 . |
| | | This requirement applies unless a recipient can demonstrate good cause for disenrolling or if he/she moves out of the entity's service area or becomes ineligible. |
| | | ___ Disenrollment rights are restricted for a period of _____ months (not to exceed 12 months). |
| | | During the first three months of each enrollment period the recipient may disenroll without cause. The State will provide notification, at least once per year, to recipients enrolled with such organization of their right to and restrictions of terminating such enrollment. |
| | | ___ No restrictions upon disenrollment rights. |
| | 1903(m)(2)(H), 1902(a)(52) of the Act P.L. 101-508 42 CFR 438.56(g) | In the case of individuals who have become ineligible for Medicaid for the brief period described in section 1903(m)(2)(H) and who were enrolled with an MCO, PIHP, PAHP, or PCCM when they became ineligible, the Medicaid agency may elect to reenroll those individuals in the same entity if that entity still has a contract. |
| | | ___ The agency elects to reenroll the above individuals who are ineligible in a month but in the succeeding two months become eligible, into the same entity in which they were enrolled at the time eligibility was lost. |
| | | ___ The agency elects not to reenroll above individuals into the same entity in which they were previously enrolled. |

* Agency that determines eligibility for coverage.

___x___ Not Applicable

State/Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | B. Optional Groups Other Than the Medically Needy (Continued) |
| | 42 CFR 435.217 | ___ 4. A group or groups of individuals who would be eligible for Medicaid under the plan if they were in a NF or an ICF/MR, who but for the provision of home and community-based services under a waiver granted under 42 CFR Part 441, Subpart G would require institutionalization, and who will receive home and community-based services under the waiver. The group or groups covered are listed in the waiver request. This option is effective on the effective date of the State's section 1915(c) waiver under which this group(s) is covered. In the event an existing 1915(c) waiver is amended to cover this group(s), this option is effective on the effective date of the amendment. |

Not Applicable

*Agency that determines eligibility for coverage.

Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other Than the Medically Needy Continued)

1902(a)(10)(A)(ii)(V) of the Act ___ 7. Individuals who are in institutions for at least 30 consecutive days and who are eligible under a special income level. Eligibility begins on the first day of the 30-day period. These individuals meet the income standards specified in Supplement 1 to Attachment 2.6-A.

___ The State covers all individuals as described above.

___ The State covers only the following group or groups of individuals:

___ Aged
___ Blind
___ Disabled
___ Individuals under the age of--
___ 21
___ 20
___ 19
___ 18
___ Caretaker relatives
___ Pregnant women

42 CFR 436.220 ___ 8. Individuals who would be eligible for AFDC if their work-related child care costs were paid from earnings rather than as a service expenditure by the agency. The AFDC plan deducts work-related child care costs from income to determine the amount of AFDC.

___ The State covers all individuals as described above.

Territory: Puerto Rico

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | B. Optional Groups Other Than the Medically Needy (Continued) |
| | 1902(a)(10)(A)(ii) and 1905(a) of the Act | ___ The State covers only the following groups or groups of individuals: |
| | | ___ Individuals under the age of-- |
| | | ___ 21 |
| | | ___ 20 |
| | | ___ 19 |
| | | ___ 18 |
| | | ___ Caretaker relatives |
| | | ___ Pregnant women |
| DOH | 436.210<br>436.222<br>1902(a)(10)(A)(i) of the Act | 9. X a. All individuals who are not described in section 1902(a)(10)(A)(i) of the Act, and who meet the income and resource requirements of the AFDC State plan and who are 21 years of age, or younger as indicated below: |
| | | ___ 20 |
| | | ___ 19 |
| | | ___ 18 |
| | | ___ b. Reasonable classifications of individuals described in (a) above as follows: |
| | | ___ (1) Individuals for whom public agencies are assuming full or partial financial responsibility and who are: |
| | | ___ (a) In foster homes (and are under the age of ___). |
| | | ___ (b) In private institutions (and are under the age of ___). |

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other Than the Medically Needy (Continued)

___ (c) In addition to the group under b.(1)(a) and (b), individuals placed in foster homes or private institutions by private, nonprofit agencies (and under the age of ___).

___ (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of ___).

___ (3) Individuals in NFs (who are under the age of ___).

___ (4) In addition to the group under (b)(3), the individuals in ICF/MRs (who are under the age of ___).

___ (5) Individuals in psychiatric facilities or programs (who are under the age of ___).

___ (6) Other defined groups (and ages), as specified in Supplement 1 of ATTACHMENT 2.2-A.

1902(a)(10)(A)(ii)(VIII) of the Act ___ 10. A child for whom there is in effect a State adoption assistance agreement (other than under title IV-E of the Act), who, as determined by the State adoption agency, cannot be placed for adoption without medical assistance because the child has special needs for medical or rehabilitative care, and who before execution of the agreement--

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

B. Optional Groups Other Than the Medically Needy (Continued)

(a) Was eligible for Medicaid under the State's approved Medicaid plan; or

(b) Would have been eligible for Medicaid if the standards and methodologies of title IV-E of the Act for the foster care program were applied rather than using the AFDC standards and methodologies.

| Agency* | Citation(s) | | Groups Covered |
|---|---|---|---|
| | | B. | Optional Groups Other Than the Medically Needy (Continued)<br><br>The State covers only the following group or groups of individuals under the age of--<br>___ 21<br>___ 20<br>___ 19<br>___ 18 |
| DOH | 42 CFR 436.230 | X | 11. Essential spouse of a recipient of:<br>X OAA X AB X APTD X AABD<br><br>Spouse is living with and determined essential to the well being of the recipient of OAA, AB, APTD, or AABD, and his (her) needs are taken into consideration in determining the amount of financial assistance. |
| | 1902 (a)(10) (A)(i)(IV), 1902(a)(10) (A)(ii)(IX) 1902(l), and 1902(l)(4)(B) of the Act | ___ | 12. Low income pregnant women and infants described in section 1902(l) of the Act.<br><br>Supplement 1 to ATTACHMENT 2.6-A specifies the income level (established at an amount up to 185 percent of the Federal poverty level) for this group. Supplement 3 of ATTACHMENT 2.6-A specifies any resource standards for this group. |

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | B. Optional Groups Other Than the Medically Needy (Continued) |
| | 13. Children: |
| 1902(a)(10)(A)(i)(VI) and 1902(l)(1)(C) of the Act | __ a. who have attained 1 year of age but have not attained 6 years of age, with incomes at or below 133 percent of the Federal poverty levels. |
| 1902(a)(10)(A)(i)(VII) and 1902(l)(1)(D) of the Act | __ b. born after September 30, 1983, who have attained 6 years of age but have not attained 19 years of age, with family incomes at or below 100 percent of the Federal poverty levels. |
| | Supplement 1 to ATTACHMENT 2.6-A specifies the income levels for these groups. |
| | Supplement 3 to ATTACHMENT 2.6-A specifies any resource standards for these groups. |

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | B. Optional Groups Other Than the Medically Needy (Continued) |
| 1902(a)(10)(A)(ii)(X) and 1902(m)(1) & (2) of the Act | ___ 14. Individuals--<br>a. Who are 65 years old or older or are disabled as determined under section 1614 of the Act;<br>b. Whose income does not exceed the income level (established at an amount up to 100 percent of the Federal income poverty level) specified in Supplement 1 to ATTACHMENT 2.6-A for a family of the same size; and<br>c. Whose resources do not exceed the maximum amount allowed under SSI or under the State's medically needy program. |
| 1902(a)(47) and 1920 of the Act | ___ 15. Pregnant women who are determined by a "qualified provider" (as defined in §1920(b)(2) of the Act) based on preliminary information, to meet the highest applicable income criteria specified in this plan under ATTACHMENT 2.6-A and are therefore determined to be presumptively eligible during a presumptive eligibility period in accordance with §1920 of the Act. |

NOT APPLICABLE

| Agency* | Citation(s) | Groups Covered |
|---|---|---|

C. Optional Coverage - Medically Needy

42 CFR 436.301 — This plan includes the medically needy.

___ No.

X Yes. This plan covers:

1902(a)(10)(C)(ii)(II) of the Act — 1. Pregnant women who, except for income and/or resources, would be eligible as categorically needy under title XIX of the Act.

1902(e) of the Act — 2. Women who, while pregnant, were eligible for and have applied for Medicaid and receive Medicaid as medically needy under the approved State plan on the day the pregnancy ends. These women continue to remain eligible, as though they were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for a 60-day period (beginning on the last day of pregnancy) and for any remaining days in the month in which the 60th day falls.

1902(a)(10)(C)(ii)(I) of the Act — 3. Individuals under age 18 who, but for income and/or resources, would be eligible under section 1902(a)(10)(A)(i) of the Act.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | C. Optional Coverage - Medically Needy (Continued) |
| 1902(e)(4) of the Act | X 4. A child born to a woman who is eligible for and receiving Medicaid as medically needy on the date of the child's birth. The child is deemed eligible for one year from birth as long as the mother remains eligible, or would remain eligible if still pregnant, and the child remains in the same household as the mother. |
| 42 CFR 436.308 | X 5. a. Financially eligible individuals who are not described in section C.3. above and who are under the age of-- |
| 1902(a)(10)(C)(ii) of the Act | X 21<br>___ 20<br>___ 19<br>___ 18 or under age 19 who are full-time students in a secondary school or in the equivalent level of vocational or technical training. |

Agency* Citation(s) Groups Covered

C. Optional Coverage - Medically Needy (Continued)

b. Reasonable classifications of financially eligible individuals under the ages of 21, 20, 19, or 18 as specified below:

___ (1) Individuals for whom public agencies are assuming full or partial financial responsibility and who are:

___ (a) In foster homes (and are under the age of _____).

___ (b) In private institutions (and are under the age of _____).

___ (c) In addition to the group under b.(1)(a) and (b), individuals placed in foster homes or private institutions by private, nonprofit agencies (and are under the age of ____).

OFFICIAL



Territory: Puerto Rico

| Agency* | Citation(s) | | Groups Covered |
|---|---|---|---|
| | | | C. Optional Coverage - Medically Needy (Continued) |
| | | | ___ (2) Individuals in adoptions subsidized in full or part by a public agency (who are under the age of _____). |
| | | | ___ (3) Individuals in NFs (who are under the age of _____). NF services are provided under this plan. |
| | | | ___ (4) In addition to the group under (b)(3), individuals in ICFs/MR (who are under the age of _____). |
| | | | ___ (5) Individuals receiving active treatment as inpatients in psychiatric facilities or programs (who are under the age of _____). Inpatient psychiatric services for individuals under age 21 are provided under this plan. |
| | | | ___ (6) Other denied groups (and ages), as specified in Supplement 1 of ATTACHMENT 2.2-A. |
| DOH | 42 CFR 436.310 | X | 6. Caretaker Relatives. |
| | 42 CFR 436.320 | X | 7. Aged Individuals. |
| | 42 CFR 436.321 | X | 8. Blind Individuals. |
| | 42 CFR 436.322 | X | 9. Disabled Individuals. |

Territory: *Puerto Rico*

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | D. Optional Coverage - Qualified Medicare Beneficiaries |
| 1902(a)(10)(E)(i) and 1905(p)(4) of the Act | | ___ Qualified Medicare Beneficiaries--<br>1. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);<br>2. Whose income does not exceed the percent of the Federal poverty level specified in Supplement 1 to ATTACHMENT 2.6-A ; and<br>3. Whose resources do not exceed twice the maximum standard under SSI. |
| 1905(p)(3) of the Act | | (Medical assistance for this group is limited to Medicare cost-sharing as defined in section 1905(p)(3) of the Act). |

*Not Applicable*

State/Territory: PUERTO RICO

| Citation | Groups Covered |
|---|---|
| B. | Optional Groups Other Than the Medically Needy (Continued) |
| 1906 of the Act | 18. Individuals required to enroll in cost-effective employer-based group health plans remain eligible for a minimum enrollment period of 12 months. |
| 1902(a)(10)(F) and 1902(u)(1) of the Act | 19. Individuals entitled to elect COBRA continuation coverage and whose income as determined under Section 1612 of the Act for purposes of the SSI program, is no more than 100 percent of the Federal poverty level, whose resources are no more than twice the SSI resource limit for an individual, and for whom the State determines that the cost of COBRA premiums is likely to be less than the Medicaid extenditures for an equivalent set of services. See Supplement 11 to Attachment 2.6-A. |

Not Applicable

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

## COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation (s) | Groups Covered |
|---|---|
| | B. Optional Coverage Other Than the Medically Needy (Continued) |
| 1902(a)(10)(A)(ii)(XIV) of the Act | X 19. Optional Targeted Low Income Children who: |

a. are not eligible for Medicaid under any other optional or mandatory eligibility group;

b. would not be eligible for Medicaid under the policies in the State's Medicaid plan as in effect on April 15, 1997 (other than because of the age expansion provided for in §1902(1)(2)(D);

c. are not covered under a group health plan or other group health insurance (as such terms are defined in §2791 of the Public Health Service Act coverage) other than under a health insurance program in operation before July 1, 1997 offered by a State which receives no Federal funds for the program;

d. are not members of families that are eligible for health benefits coverage under a State health benefits plan on the basis of a family members' employment with a public agency;

e. are not inmates of public institutions or patients in institutions for mental diseases; and



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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

## COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation (s) | Groups Covered

f. have family income at or below:
200 percent of the Federal poverty level for the size family involved, as revised annually in the Federal Register; or

A percentage of the Federal poverty level, which is in excess of the "Medicaid applicable income level" (as defined in §2110 (b) (4) of the Act) but by no more than 50 percentage points.

The State covers:

X All children described above who are under age 19 (18, 19) with family income at or below 200 percent of the Commonwealth poverty level*

_____ The following reasonable classifications of children described above who are under age _____ (18,19) with family income at or below the percent of the Federal poverty level specified for the classification:

(ADD NARRATIVE DESCRIPTION (S) OF THE REASONABLE CLASSIFICATION (S) AND THE PERCENT OF THE FEDERAL POVERTY LEVEL USED TO ESTABLISH ELIGIBILITY FOR EACH CLASSIFICATION).

Income is established using the income and resource methodologies used for purposes of establishing eligibility under the State's title XXI State plan. (If not included in sections 4.1.3 and 4.1.4 of the State's title XXI State plan, these methodologies are explained below).

(IF NOT INCLUDED IN YOUR TITLE XXI STATE PLAN, ADD NARRATIVE EXPLANATION OF THE METHODOLOGIES

*see page Attachment 2.2A page 23e



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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

## COVERAGE AND CONDITIONS OF ELIGIBILITY

| Citation (s) | | Groups Covered |
|---|---|---|
| | | USED TO ESTABLISH COUNTABLE INCOME AND RESOURCES). |
| 1902 (e) (12) of the Act | Not applicable | ____ 20. A child under age _____ (not to exceed age 19) who has been determined eligible is deemed to be eligible for a total of _____ months (not to exceed 12 months) regardless of changes in circumsstances other than attainment of the maximum age stated above. |
| 1920A of the Act | Not applicable | ____21. Children under age 19 who are determined by a "qualified entity" (as defined in §1920A (b) (3) (A) based on preliminary information, to meet the highest applicable income criteria specified in this plan as applicable to children.<br><br>The presumptive period begins on the day that the determination is made. If an application for Medicaid is filed on the child's behalf by the last day of the month following the month in which the determination of presumptive period ends on the day that the State agency makes a determination of eligibility based on that application. If an application is not filed on the child's behalf by the last day of the month following the month the determination of presumptive eligibility was made, the presumptive period ends on that last day. |



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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

## COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation (s) Groups Covered

### MEDICAID
### FISCAL YEAR 1998 POVERTY LEVEL

| FAMILY SIZE | FEDERAL POVERTY LEVEL | PUERTO RICO MEDICAID POVERTY LEVEL | % OF FEDERAL POVERTY LEVEL | 200% OF PR POVERTY LEVEL | % OF FEDERAL POVERTY LEVEL |
|---|---|---|---|---|---|
| 1 | 8050 | 4800 | 60 | 9600 | 120 |
| 2 | 10850 | 5940 | 55 | 11880 | 110 |
| 3 | 13650 | 7080 | 52 | 14160 | 104 |
| 4 | 16450 | 8220 | 50 | 16440 | 100 |
| 5 | 19250 | 9360 | 49 | 18720 | 98 |
| 6 | 22050 | 10500 | 48 | 21000 | 96 |
| 7 | 24850 | 11640 | 47 | 23280 | 94 |
| 8 | 27650 | 12780 | 47 | 25560 | 93 |
| 9 | 30450 | 13920 | 46 | 27840 | 92 |
| 10 | 33250 | 15060 | 46 | 30120 | 91 |
| 11 | 36050 | 16200 | 45 | 32400 | 90 |
| 12 | 38850 | 17340 | 45 | 34680 | 90 |
| 13 | 41650 | 18480 | 45 | 36960 | 89 |
| 14 | 44450 | 19620 | 45 | 39240 | 89 |
| 15 | 47250 | 20760 | 44 | 41520 | 88 |
| 16 | 50050 | 21900 | 44 | 43800 | 88 |
| 17 | 52850 | 23040 | 44 | 46080 | 88 |
| 18 | 55650 | 24180 | 44 | 48360 | 87 |



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Territory: *Puerto Rico*

| Agency* | Citation(s) | Groups Covered |
|---|---|---|
| | | E. Optional Coverage - Qualified Disabled and Working Individuals |
| | 1902(a)(10)(E)(ii) and 1905(p)(4) of the Act | ___ Qualified disabled and working individuals-- |
| | | 1. Who are entitled to hospital insurance benefits under Medicare Part A under section 1818A of the Act; |
| | | 2. Whose income does not exceed 200 percent of the Federal poverty level; and |
| | | 3. Whose resources do not exceed twice the maximum standard under SSI. |
| | | 4. Who are not otherwise eligible for medical assistance under Title XIX of the Act. |
| | 1905(p)(3)(A)(i) | (Medical assistance for this group is limited to cost-sharing as defined in section 1905(p)(3)(A)(i) of the Act.) |
| | | F. Optional Coverage - Specified Low-Income Medicare Beneficiaries |
| | 1902(a)(10)(E)(iii) and 1905(p)(4) of the Act | ___ Specified low-income Medicare beneficiaries-- |
| | | 1. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act); |
| | | 2. Whose income for calendar years beginning 1993 exceeds the percent of the Federal poverty level in D. 2., but is less than the percentage of the Federal poverty level specified in Supplement 1 to ATTACHMENT 2.6-A; |
| | | 3. Whose resources do not exceed twice the maximum standard under SSI. |
| | 1905(p)(3)(a)(ii) of the Act | (Medical assistance for this group is limited to cost-sharing as defined in section 1905(p)(3)(A)(ii) of the Act.) |

*Not Applicable*

State: PUERTO RICO

| Citation(s) | Groups Covered |
|---|---|
| | C. Optional Coverage of Medically Needy (Continued) |
| 1906 of the Act | 12. Individuals required to enroll in cost effective employer-based group health plans remain eligible for a minimum enrollment period of 12 months. |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Puerto Rico

REASONABLE CLASSIFICATIONS OF INDIVIDUALS UNDER
THE AGE OF 21, 20, 19, AND 18

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

A. DEFINITION OF BLINDNESS IN TERMS OF OPHTHALMIC MEASUREMENT

An individual is considered blind if he has central visual acuity of 20/200 or less in the better eye with correcting glasses or a field defect in which the peripheral field has contracted to such an extent that the widest diameter of visual field subtends an angular distance of no greater than 20°.

*Agency that determines eligibility for coverage.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

B. DEFINITION OF PERMANENT AND TOTAL DISABILITY

" Permanently and totally disabled" means that the individual has some permanent physical or mental impediment disease or loss, or combination thereof, that substantially precludes him from engaging in useful occupations within his competence, such as holding a job.

*Agency that determines eligibility for coverage.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Puerto Rico

Method for Determining Cost Effectiveness of Caring for Certain Disabled Children At Home

Not Applicable

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

ELIGIBILITY CONDITIONS AND REQUIREMENTS

| Citation | Condition or Requirement |
|---|---|
| | A. Each individual covered under the plan meets the following conditions: |
| 42.CFR Part 436, Subpart G X | 1. Is financially eligible to receive services. |
| 42.CFR Part 436, Subpart F | 2. Meets the applicable non-financial eligibility conditions. |
| | a. (i) Except as specified under items A.2.a.(ii) and (iii) below, for categorically needy individuals, meets the non-financial eligibility conditions of the related cash assistance program. |
| 1902(l) of the Act<br>Not Applicable | (ii) For pregnant women and infants or children with incomes up to a percentage of the Federal poverty level covered as optional groups under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), and 1902(a)(10)(A)(ii)(IX) of the Act, meets the non-financial criteria of section 1902(l) of the Act. |
| 1902(m) of the Act<br>Not Applicable | (iii) For aged and disabled individuals with incomes up to the Federal poverty level covered under section 1902(a)(10)(A)(ii)(X) of the Act, meets the non-financial criteria of section 1902(m) of the Act. |

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

ELIGIBILITY CONDITIONS AND REQUIREMENTS

| Citation | Condition or Requirement |
|---|---|
| | b. For the medically needy, meets the non-financial eligibility conditions of 42 CFR Part 436. |
| 1905(p) of the Act | c. For qualified Medicare beneficiaries, meets the non-financial criteria of section 1905(p) of the Act. |
| 1905(s) of the Act | d. For qualified disabled and working individuals, meets the non-financial criteria of section 1905(s). |
| 1902(A)(10)(E)(iii) of the Act | e. For specified low-income Medicare beneficiaries, meets the non-financial criteria of section 1905(p) of the Act. |

*Not Applicable*

| Citation | Condition or Requirement |
|---|---|
| 42.CFR 436.402 | 3. Is residing in the United States and -- |
| | a. Is a citizen; |
| Sec. 245A of the Immigration and | b. Is an alien lawfully admitted for permanent residence, or otherwise permanently residing Nationality Act in the United States under color or law, as defined in 42 CFR 435.408; |
| 1902(a) and 1903(v) of the Act, P.L. 99-509 (Section 9406) Sec. 245A(h)(3)(B) of the Immigration and | c. Is an alien granted lawful temporary resident status under sections 245A and 210A of the Immigration and Nationality Act if the individual is aged, blind, or disabled as defined in section 1614(a)(1) of the Act, Nationality Act under 18 years of age, or a Cuban/Haitian entrant as defined in section 501(e)(1) and (2)(A) of Public Law 96-422; |
| | d. Is an alien granted lawful temporary resident status under section 210 of the Immigration and Nationality Act not within the scope of c. above (coverage must be restricted to certain emergency services during the five-year period beginning on the date the alien was granted eligibility); or |
| | e. Is an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color of law (coverage must be restricted to certain emergency services). |
| P.L. 99-603 (Section 201) | f. Is an alien who is not lawfully admitted for permanent residence or otherwise permanently residing in the United States under color or law. |

State/Territory: Puerto Rico

| Citation | Condition or Requirement |
|---|---|
| 42 CFR ~~435.1008~~ 436.1004 | 5. a. Is not an inmate of a public institution. Public institutions do not include medical institutions, intermediate care facilities, or publicly operated community residences that serve no more than 16 residents, or certain child care institutions. |
| 42 CFR ~~435.1008~~ 436.1004 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.<br>/X/ 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 Act | 6. Is required, as a condition of eligibility, to assign his or her own rights, or the rights of any other person who is eligible for Medicaid and on whose behalf the individual has legal authority to execute an assignment, to medical support and payments for medical care from any third party. (Medical support is defined as support specified as being for medical care by a court or administrative order.) |

| 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(l)(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~~ 436.901 | 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). |

State/Territory: Puerto Rico

| 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). |

Territory: Puerto Rico

| Citation | Condition or Requirement |
|---|---|
| 42 CFR 436.403<br>1902(b) of the Act | 4. Is a resident of the State, regardless of whether or not the individual maintains the residence permanently or maintains it at a fixed address.<br><br>___ State has interstate residency agreement with the following States:<br><br>___ State has open agreement(s).<br><br>___ Not applicable; no residency requirement. |
| 42.CFR<br>436.1004<br>1905(a)<br>of the Act. | 5. a. Is not an inmate of a public institution. Public institutions do not include medical institutions, intermediate care facilities, or publicly operated community residences that serve no more than 16 residents, or certain child care institutions.<br><br>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.<br><br>_X_ Not applicable with respect to individuals under age 22 in psychiatric facilities or programs. Such services are not provided under the plan. |

| Citation | Condition or Requirement |
|---|---|
| 42 CFR 433.145 and 436.604 1912 of the Act | 6. Is required, as a condition of eligibility, to assign rights to medical support and to payment 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.<br>___ Assignment of rights is automatic because of State law. |
| 42 CFR 436.901 and 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). |
| 1902(l)(4)(C) of the Act | 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 section 1902(a)(10)(A)(i)(IV) and (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. |

Territory: Puerto Rico

| Citation | Condition or Requirement |
|---|---|

B. Post-Eligibility Treatment of Institutionalized Individuals

42.CFR 436.832

Required deductions.

The following amounts are deducted from gross income when computing the application of an individual's or couple's income to the cost of institutional care:

1. Personal Needs Allowance. $ $60 . Couple / $30 . Individual

2. For maintenance of the non-institutionalized spouse only. $ 32.00

3. For non-institutionalized children, each family member. $ 32.00

4. Amounts for incurred medical expenses not subject to payment by a third party.

   a. Health insurance premiums, deductibles and coinsurance charges.

   b. Necessary medical or remedial care not covered under the Medicaid plan. (Reasonable limits on amounts are described in Supplement 2 to ATTACHMENT 2.6-A).

5. An amount for maintenance of a single individual's home for not longer than 6 months, if a physician has certified he or she is likely to return home within that period.

   ___ Yes. Amount for maintenance of home $_____

   X No.

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| Citation | Condition or Requirement |
|---|---|
| 1902(1) of the Act | 6. Benefits paid under AB, APTD, or AABD to blind or disabled individuals during the initial 2 months in which the individuals receive care in a hospital, SNF, or ICF if the individuals are allowed to retain the benefits under agreement with the facility; or during a temporary stay in a hospital, SNF, or ICF, if it is determined that the individuals' stay is not likely to exceed 3 months and they must continue to maintain a home to which they may return upon leaving the institution. |

C. Financial Eligibility - Categorically and Medically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, and Specified Low-Income Medicare Beneficiaries

1. Categorically Needy Income Levels

a. For categorically needy groups other than those specified in items C.1.b. and c. below, the financial eligibility income levels for the related cash assistance programs are applied.

b. Supplement 1 to ATTACHMENT 2.6 specifies the income eligibility levels for the following groups of individuals with incomes related to the Federal income poverty line:

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Territory: *Puerto Rico*

| Citation | | Condition or Requirement |
|---|---|---|
| 1902(l) of the Act | (i) | Optional categorically needy groups of pregnant women, infants or children covered under the provisions of sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(ii)(IX), and 1902(l)(4)(A) of the Act. |
| 1902(m) of the Act | (ii) | Optional categorically needy groups of aged and disabled individuals covered under the provisions of section 1902(a)(10)(A)(ii)(X) of the Act; and |
| 1905(p)(4) of the Act | (iii) | Optional groups of qualified Medicare beneficiaries under the provisions of section 1902(a)(10(E)(i) of the Act. |
| 1905(p)(4) of the Act | (iv) | Optional groups of specified low-income Medicare beneficiaries under the provisions of section 1902(a)(10)(E)(iii) of the Act. |
| 1905(p)(4) of the Act | c. | For optional groups of qualified disabled and working individuals, the financial eligibility income levels specified in section 1905(s) of the Act are applied. |

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Territory: *Puerto Rico*

| Citation | Condition or Requirement |
|---|---|
| 1902(a)(10), 1902(a)(17), and 1902(r)(2) of the Act | 2. Income and Resources Methodologies - Categorically Needy and Medically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, and Specified Low-Income Medicare Beneficiaries.<br><br>a. AFDC-related individuals (except for poverty level related pregnant women, infants, and children).<br><br>(1) In determining countable income and resources for AFDC-related individuals, the following methods are used:<br><br>*X* (a) The methods under the State's approved AFDC plan only; or<br><br>____ (b) The methods under the State's approved AFDC plan and/or any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A.<br><br>(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 under the children become 21. |

| Citation | Condition or Requirement |
|---|---|
| | b. Aged, Blind and Disabled Individuals. For aged, blind, and disabled individuals, including aged and disabled individuals covered under section 1902(a)(10)(A)(ii)(X) of the Act, the agency uses the following methods for determining countable income and resources:<br><br>X (1) The methods of the appropriate cash assistance program only; or<br><br>____ (2) The methods of the appropriate cash assistance program and/or more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A. |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| 1902 (1)(3) of the Act | c. Poverty level pregnant women and infants<br><br>(1) For pregnant women and infants or children covered as optional groups under the provisions of sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(ii)(IX) and 1902(l)(4) of the Act, the agency uses the following methods in determining countable income:<br><br>___ The methods of the State's approved AFDC plan.<br><br>___ The methods of the approved title IV-E only.<br><br>___ The methods of the approved AFDC State plan and/or any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A.<br><br>___ The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A.<br><br>In determining financial responsibility of relatives, the agency considers only the income of spouses living in the same household as available to each other and the income of parents as available to children living with parents until they become 21. |

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | ___ 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 person after her pregnancy ends and any remaining days in the month in which the 60th day falls. |
| | (2) For pregnant women covered under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(ii)(IX) and 1902(l)(4), the agency uses the following methods in the treatment of resources. |
| | ___ The methods used under sections 1612 and 1613 of the Act. |
| | ___ The methods used under sections 1612 and 1613 of the Act and/or any more liberal methods described in Supplement 3 of ATTACHMENT 2.6-A. |
| | ___ Not applicable. The agency does not consider resources in determining eligibility. |
| | In determining relative financial responsibility, the agency considers only the income and 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. |

NOT APPLICABLE

| Citation | Condition or Requirement |
|---|---|
| 1902(u) of the Act | (h) COBRA Continuation Beneficiaries<br><br>In determining countable income for COBRA continuation beneficiaries, the following disregards are applied:<br><br>_____ The disregards of the SSI program;<br><br>_____ 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.<br><br>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).<br><br>NOT APPLICABLE |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | (3) For infants covered under sections 1902(a)(10)(A)(i)(IV), 1902(a)(10_(A)(i)(IX) and 1902(l)(4), the agency uses the following methods in the treatment of resources:<br><br>___ The methods of the State's approved AFDC plan only.<br><br>___ The methods of the State's approved AFDC plan and/or more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A.<br><br>___ The methods of the State's approved title IV-E plan only.<br><br>___ The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A.<br><br>___ Not applicable. The agency does not consider resources in determining eligibility.<br><br>In determining the financial liability of responsible relatives, the agency considers only the income and resources of parents as available to children living with parents until they become age 21. |
| 1902(l)(3) of the Act | d. For low income children under age 6 who are described in sections 1902(a)(10)(A)(i)(VI), 1902(l)(1)(C) and 1902(l)(4) of the Act:<br><br>(1) The agency uses the following methods for determining countable income:<br><br>NOT APPLICABLE |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | ___ The methods of the State's approved AFDC plan only. |
| | ___ The methods of the State's approved AFDC plan and/or any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A. |
| | ___ The methods of the approved title IV-E plan only. |
| | ___ The methods of the approved title IV-E plan and any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A. |
| | (2) The agency uses the following methods in the treatment of resources: |
| | ___ The methods of the State's approved AFDC plan only. |
| | ___ The methods of the State's approved AFDC plan and/or more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A. |
| | ___ The methods of the State's approved title IV-E plan only. |
| | ___ The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A. |
| | ___ Not applicable. The agency does not consider resources in determining eligibility. |

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | In determining the financial liability of responsible relatives, the agency considers only the income and resources of parents as available to children living with parents until they become age 21. |
| 1902(1)(3) of the Act | e. For low income children under age 19 who are described in sections 1902(a)(10)(A)(i)(VII), 1902(l)(1)(D) and 1902(l)(4) of the Act:<br><br>(1) The agency uses the following methods for determining countable income:<br><br>___ The methods of the State's approved AFDC plan only.<br><br>___ The methods of the State's approved AFDC plan and/or any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A.<br><br>___ The methods of the approved title IV-E plan only.<br><br>___ The methods of the approved title IV-E plan and any more liberal methods described in Supplement 5 to ATTACHMENT 2.6-A.<br><br>(2) The agency uses the following methods in the treatment of resources:<br><br>___ The methods of the State's approved AFDC plan only. |

NOT APPLICABLE

OFFICIAL

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Groups Covered |
|---|---|
| | ___ The methods of the State's approved AFDC plan and/or more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A.<br><br>___ The methods of the State's approved title IV-E plan only.<br><br>___ The methods of the approved title IV-E plan and/or any more liberal methods described in Supplement 6 to ATTACHMENT 2.6-A.<br><br>___ Not applicable. The agency does not consider resources in determining eligibility.<br><br>In determining the financial liability of responsible relatives, the agency considers only the income and resources of parents as available to children living with parents until they become age 21. |
| 1902(e)(6) of the Act | f. In determining the income of pregnant women, the agency disregards all increases in income throughout the pregnancy and the postpartum period. |

NOT APPLICABLE

| Citation | Condition or Requirement |
|---|---|
| 1905(p)(1)(C) and (D) and 1902(r)(2) of the Act | g. For qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, the agency uses the following methods for treatment of income and resources--<br>___ The methods used under the SSI program.<br>___ The methods used under SSI program and/or more liberal methods described in Supplements 5 and 6 of ATTACHMENT 2.6-A. |
| 1905(s) of the Act | h. For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the agency uses the methods under the SSI program for treatment of income and resources. |
| 1902(a)(10)(E)(iii) of the Act | i. For specified low-income Medicare beneficiaries covered under section 1902(a)(10)(E)(iii) of the Act, the agency uses the same methods as in g. for QMBs. |

*Not Applicable*

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State/Territory: PUERTO RICO

| Citation | Condition or Requirement |
|---|---|
| | a. Medically Needy (Continued) |
| 1903(f)(2) of the Act | ___ (3) If countable income exceeds the MNIL standard, the agency deducts spenddown payments made to the State by the individual. |

NOT APPLICABLE

| Citation | Condition or Requirement |
|---|---|
| 1902(k) of the Act | 3. Medicaid Qualifying Trusts.<br><br>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.<br><br>☐ 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. Supplement 4 to ATTACHMENT 2.6-A specifies what constitutes an undue hardship. |

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State/Territory: PUERTO RICO

| Citation | Condition or Requirement |
|---|---|
| | 4.b. Categorically Needy - Section 1902(f) States Continued |
| 1903(f)(2) of the Act | ___ (6) Spenddown payments made to the State by the individual.<br><br>NOTE: FFP will be reduced to the extent a State is paid a spenddown payment by the individual. |

NOT APPLICABLE

| Citation | Condition or Requirement |
|---|---|
| 1902(a)(10)(C) of the Act | 4. Medically Needy Income Levels<br><br>a. Medically needy income levels (MNILs) are based on family size.<br><br>b. The MNIL does not diminish by family size.<br><br>c. The MNIL at least equals the amount of the highest income standards used on or after January 1, 1966, to determine eligibility under the cash assistance programs related to the States covered medically needy groups or groups of individuals.<br><br>Supplement 1 to ATTACHMENT 2.6-A specifies the MNILs for all covered medically needy groups. |
| 42.CFR 436.831 | 5. Handling of Excess Income - Spend-down for Medically Needy<br><br>a. Income in excess of the MNIL is considered available for payment of medical care and services. The Medicaid agency measures available income for a period of one month(s) (not to exceed six months) to determine the amount of excess countable income applicable to the cost of medical care and services. |

| Citation | Condition or Requirement |
|---|---|
| | b. If countable income exceeds the MNIL standard, the agency deducts the following incurred expenses in the following order:<br><br>(i) Health insurance premiums, deductibles and co-insurance charges.<br><br>(ii) Expenses for necessary medical and remedial care not included in the plan.<br><br>(iii) Expenses for necessary medical and remedial care included in the plan.<br><br>___ Reasonable limits on amounts of expenses deducted from income under (b)(i) and (ii) above are listed below. |

| Citation | Condition or Requirement |
|---|---|
| 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.<br><br>X The agency elects not to deduct incurred expenses that are paid by a third party that is a program funded by a State or local government under its section 1902(f) option.<br><br>6. Resource Standard - Categorically Needy<br><br>a. Except as specified in item C.6.b. below, the resource standards are the same as those in the related cash assistance program. |
| 1902(l)(3)(A), (B), and (C) of the Act | b. For pregnant women and infants covered as optional groups under the provisions of section 1902(a)(10)(A)(i)(IV), the agency applies a resource standard:<br><br>___ Yes. Supplement 3 to ATTACHMENT 2.6-A specifies the standard, which, for pregnant women, is no more restrictive than the standard under sections 1612 and 1613 of the Act and for infants, is no more restrictive than the standard applied in the State's approved AFDC plan.<br><br>___ No. The agency does not apply a resource standard to these individuals. |

Territory: Puerto Rico

| Citation | Condition or Requirement |
|---|---|
| 1902(l)(3)(A), (B), and (C) of the Act | c. For children covered as optional groups under the provisions of section 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(ii)(IX), and 1902(l)(4) of the Act, the agency applies a resource standard:<br><br>___ Yes. Supplement 3 to ATTACHMENT 2.6-A specifies the standard, which is no more restrictive than the standard applied in the State's approved AFDC plan.<br><br>X No. The agency does not apply a resource standard to these individuals. |
| 1902(a)(10)(C) of the Act | 7. Resource Standard - Medically Needy<br><br>a. The resource standard does not diminish by family size.<br><br>b. Resource standard equal to the highest resource standard used in the cash assistance programs related to the covered medically needy groups. |

State/Territory: PUERTO RICO

| 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:<br>___ The methods of the SSI program only.<br>___ The methods of the SSI program and/or more liberal methods as described in Supplement 8b to ATTACHMENT 2.6-A. |
| 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 Act | j. For COBRA continuation beneficiaries, the agency uses the following methods for treatment of resources:<br>___ The methods of the SSI program only.<br>___ More restrictive methods applied under section 1902(f) of the Act as described in Supplement 5 to Attachment 2.6-A. |

NOT APPLICABLE
QUALIFIED MEDICARE
BENEFICIARIES ARE NOT COVERD.

| Citation | Condition or Requirement |
|---|---|
| | 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. |
| NOT APPLICABLE | ___ 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. |

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| Citation | Condition or Requirement |
|---|---|
| 1905(p)(1)(D) and (p)(2)(B) and 1902(a)(10)(E)(iii) of the Act | 8. Resource Standard - Qualified Medicare Beneficiaries and Specified Low-Income Medicare Beneficiaries<br><br>For qualified Medicare beneficiaries and specified low-income Medicare beneficiaries covered under sections 1902(a)(10)(E)(i) and 1902(a)(10)(E)(iii) of the Act, the resource standard is twice the SSI resource standard. |
| 1905(s) of the Act | 9. Resource Standard - Qualified Disabled and Working Individuals<br><br>For qualified disabled and working individuals covered under section 1902(a)(10(E)(ii) of the Act, the resource standard is twice the SSI resource standard. |

*Not Applicable*

| Citation | Condition or Requirement |
|---|---|
| | 10. Excess Resources - Categorically Needy and Medically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, and Specified Low-Income Medicare Beneficiaries<br><br>Any excess resources make the individual ineligible. |
| 42 CFR 436.901 | 11. Effective Date of Eligibility - Categorically and Medically Needy, Qualified Medicare Beneficiaries, Qualified Disabled and Working Individuals, and Specified Low-Income Medicare Beneficiaries.<br><br>a. Groups other than qualified Medicare beneficiaries<br><br>(i) For the prospective period--<br><br>Coverage is available for the full month if the following individuals are eligible at any time during the month.<br><br>_x_ Aged, blind, disabled.<br><br>_x_ AFDC-related.<br><br>Coverage is available only for the period during the month for which the following individuals meet the eligibility requirements.<br><br>___ Aged, blind, disabled.<br><br>___ AFDC-related. |

State/Territory: PUERTO RICO

| Citation | | Condition or Requirement |
|---|---|---|
| 1902(u) of the Act | 9.1 | For COBRA continuation beneficiaries, the resource standard is: |
| | ___ | Twice the SSI resource standard for an individual. |
| | ___ | More restrictive standard as applied under section 1902(f) of the Act as described in Supplement 8 to Attachment 2.6-A. |

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

FINANCIAL ELIGIBILITY

| Citation(s) | Condition or Requirement |
|---|---|
| | (ii) For the retroactive period--<br><br>Coverage is available for three months before the date of application if the following individuals are eligible.<br><br>___ Aged, blind, disabled.<br><br>___ AFDC-related.<br><br>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.<br><br>_X_ Aged, blind, disabled.<br><br>_X_ AFDC-related. |
| 1902(b)(1) of the Act | (iii) For a presumptive eligibility period for pregnant women only--<br><br>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 ATTACHMENT 2.6-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.<br><br>NOT APPLICABLE |

| Citation | Condition or Requirement |
|---|---|
| 1902(e)(8) and 1905(a) of the Act | 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 determination is valid for--<br><br>/_/ 12 months<br><br>/_/ 6 months<br><br>/_/ __ months (no less than 6 months and no more than 12 months). |

Not Applicable

OFFICIAL



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

INCOME ELIGIBILITY LEVELS

A. CATEGORICALLY NEEDY

Payment Standards for O A A, AB APTD And AFDC

| FAMILY SIZE | PAYMENT |
|---|---|
| 1 | $32. |
| 2 | 64. |
| 3 | 96. |
| 4 | 128. |
| 5 | 160. |
| 7 to 12 add. on $32. | 192 |
| 13 add on $24 | |

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

INCOME ELIGIBILITY LEVELS (continued)

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women and Infants

The levels for determining income eligibility for groups of pregnant women and infants under the provisions of section 1902(l)(2) of the Act are as follows:

Based on ____ percent of the official Federal income poverty level:

| Family Size | Income Level |
|---|---|
| 1 | $_____ |
| 2 | $_____ |
| 3 | $_____ |

Not Applicable

OFFICIAL



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

INCOME ELIGIBILITY LEVELS

B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. CHILDREN

a. Children Under Age 6

For children under Section 1902(a)(10)(A)(i)(VI) of the Act (children who have attained age 1 but have not attained age 6), the income eligibility level is 133 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

b. Children Under Age 19

For children under Section 1902(a)(10)(i)(VII) of the Act (children born after September 30, 1983 who have attained age 6 but have not attained age 19), the income eligibility level is 100 percent of the Federal poverty level (as revised annually in the Federal Register) for the size family involved.

NOT APPLICABLE

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

INCOME ELIGIBILITY LEVELS (Continued)

3. Aged and Disabled Individuals

The levels for determining income eligibility for groups of aged and disabled individuals under the provisions of section 1902(m)(4) of the Act are as follows:

Based on ____ percent of the official Federal income poverty level:

| Family Size | Income Level |
|---|---|
| 1 | $ |
| 2 | $ |
| 3 | $ |
| 4 | $ |
| 5 | $ |

Not Applicable

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: _____

INCOME ELIGIBILITY LEVELS (Continued)

C. OPTIONAL GROUP OF QUALIFIED MEDICARE BENEFICIARIES

The levels for determining income eligibility for qualified Medicare beneficiaries under the provisions of sections 1905(p)(2)(A) and 1905(p)(4) of the Act are based on ____ percent of the official Federal poverty level.

D. OPTIONAL GROUP OF SPECIFIED LOW-INCOME MEDICARE BENEFICIARIES

The levels for determining income eligibility for specified low-income Medicare beneficiaries under the provisions of sections 1905(p)(2)(A) and 1905(p)(4) of the Act are based on ____ percent of the official Federal poverty level.

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TERRITORY: Puerto Rico

INCOME LEVELS - MEDICALLY NFEDY

X Applicable to all group ____ Applicable to:

| (1) Family Size | (2) Net income level protected for Maintenance /___/ Urban only /x/ Urban & rural | (3) Net income level for persons living in rural areas |
|---|---|---|
| 1 | $ 4,800.00 | $ |
| 2 | $ 5,940.00 | $ |
| 3 | $ 7,080.00 | $ |
| 4 | $ 8,220.00 | $ |
| 5 | $ 9,360.00 | $ |
| 6 | $ 10,500.00 | $ |
| 7 | $ 11,640.00 | $ |
| 8 | $ 12,780.00 | $ |
| 9 | $ 13,920.00 | $ |
| 10 | $ 15,060.00 | $ |
| For each additional person, add: 1,140.00 | $ | $ |

*per PM 86-20 (PR 87-1)



PAYMENT STANDARDS FOR OAA, AB, APTD and AFDC

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| FAMILY SIZE | PAYMENT |
|---|---|
| 1 | $32 |
| 2 | 64 |
| 3 | 96 |
| 4 | 128 |
| 5 | 160 |
| 6 | 192 |
| 7 to 12 Add on $32.00 | |
| 13 on add $24 | |

NOTE: Adult and children categories have the same payment standards.

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Revision: HCFA-PM-87-4 (BERC)
MARCH 1987

SUPPLEMENT 2 TO ATTACHMENT 2.6-A
OMB No.: 0938-0193

Territory: Puerto Rico N/A

**REASONABLE LIMITS ON AMOUNTS FOR NECESSARY MEDICAL OR REMEDIAL CARE NOT COVERED UNDER MEDICAID**

OFFICIAL



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: PUERTO RICO

b. Mandatory Group of Children under Section 1902(a)(10)(i)(VII) of the Act. (Children born after September 30, 1983 who have attained age 6 but have not attained age 19.)

X Same as resource levels in the State's approved AFDC plan.

___ Less restrictive than the AFDC levels and are as follows:

| Family Size | Resource Level |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |

OFFICIAL



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

RESOURCE LEVELS

A. OPTIONAL GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women

___ Same as resource levels under sections 1612 and 1613 of the Act.

___ Less restrictive levels than those under sections 1612 and 1613 of the Act and are as follows:

| Family Size | Resource Levels |
|---|---|
| 1 | |
| 2 | |

Not Applicable

OFFICIAL



Territory: Puerto Rico

RESOURCE LEVELS (Continued)

2. Infants

___ Same as resource levels in the State's approved AFDC plan.

___ Less restrictive than the AFDC levels and are as follows:

| Family Size | Resource Level |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| For each additional person | |

Not Applicable

OFFICIAL



STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

3. Low Income Children Under Age 6

___ Same as resource levels in the State's approved AFDC plan.

___ Less restrictive than the AFDC levels and are as follows:

| Family Size | Resource Level |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |

For each additional person _____

NOT APPLICABLE

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: PUERTO RICO

4. Low Income Children Under Age 19

___ Same as resource levels in the State's approved AFDC plan.

___ Less restrictive than the AFDC levels and are as follows:

| Family Size | Resource Level |
|---|---|
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |
| 7 | |
| 8 | |
| 9 | |
| 10 | |

For each additional person _____

5. Aged and Disabled Individuals and Qualified Medicare Beneficiaries

___ Same as resource levels under sections 1612 and 1613 of the Act.

___ Same as medically needy resource levels (applicable only if State has a medically needy program).

NOT APPLICABLE

Territory: Puerto Rico

RESOURCE LEVELS (Continued)

B. MEDICALLY NEEDY

X Applicable to all groups, regardless of family size.

For each eligible family unit, $2,500 will be considered as the sole resource level.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

CONSIDERATION OF MEDICAID QUALIFYING TRUSTS--UNDUE HARDSHIP

1902(k) of the Act, P.L. 99-272 (Section 9506)

The following criteria will be used to determine whether the agency will not count the funds in a trust as specified in ATTACHMENT 2.6-A, section C.3., because it would work an undue hardship for categorically and medically needy individuals:

Undue Hardship is not a consideration.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

MORE LIBERAL METHODS OF TREATING INCOME UNDER SECTION 1902(r)(2) OF THE ACT

Not Applicable

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Territory: Puerto Rico

MORE LIBERAL METHODS OF TREATING RESOURCES UNDER SECTION 1902(r)(2) OF THE ACT

Not Applicable

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: COMMONWEALTH OF PUERTO RICO

**LESS RESTRICTIVE METHODS OF TREATING RESOURCES UNDER SECTION 1902 (r)(2) OF THE ACT**

| Citation (s) | Provision (s) |
|---|---|
| 1902(r)(2) of the Act | For medically needy aged, blind and disabled individuals Puerto Rico will disregard the difference between $10,000 and the medically needy resource standard. |

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: COMMONWEALTH OF PUERTO RICO

**LESS RESTRICTIVE METHODS OF TREATING INCOME UNDER SECTION 1902 (r)(2) OF THE ACT**

| Citation (s) | Provision (s) |
|---|---|
| 1902(r)(2) of the Act | For medically needy aged, blind and disabled individuals, Puerto Rico will disregard countable earned and unearned income equal to the difference between the income eligibility standard established under the Puerto Rico Health Poverty Level and the Commonwealth's medically needy income eligibility standard for the appropriate family size.<br><br>Disregard the difference between the Title II Medicare Part B Premium payment and the amount of the premium reduction offered by Medicare Advantage Organizations in Puerto Rico for aged, blind and disabled medically needy individuals. |

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State Agency: COMMONWEALTH OF PUERTO RICO

**LESS RESTRICTIVE METHODS OF TREATING INCOME UNDER SECTION 1902 (r)(2) OF THE ACT**

| Citation (s) | Provision (s) |
|---|---|
| 1902(r)(2) of the Act | For medically needy aged, blind, and disabled individuals, Puerto Rico will disregard countable earned and unearned income equal to the difference between the income eligibility standard established under the Puerto Rico Health Plan Poverty Level and the Commonwealth's medically needy income eligibility standard for the appropriate family size. |

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State/Territory: PUERTO RICO

| Citation | Condition or Requirement |
|---|---|

COST EFFECTIVENESS METHODOLOGY FOR
COBRA CONTINUATION BENEFICIARIES

1902(u) of the Act

Premium payments are made by the agency only if such payments are likely to be cost-effective. The agency specifies the guidelines used in determining cost effectiveness by selecting one of the following methods:

X The methodology as described in SMM section 3598.

___ Another cost-effective methodology as described below.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: / Territory: Puerto Rico

Transfer of Resources

| | |
|---|---|
| 1917 c of the Act | For transfer of resources made on or after July 1, 1988 the State is in compliance with provisions of 1917c of the Act as amended by the provisions of the Medicare Catastrophic Coverage Act of 1988, the Family Support Act of 1988 and the Omnibus Reconciliation Act of 1989. |