STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: ALABAMA

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY

1. AFDC-Related Groups Other Than Poverty Level Pregnant Women and Infants:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Need Standard</th>
<th>Payment Standard Amounts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>457</td>
<td>111</td>
</tr>
<tr>
<td>2</td>
<td>563</td>
<td>137</td>
</tr>
<tr>
<td>3</td>
<td>673</td>
<td>164</td>
</tr>
<tr>
<td>4</td>
<td>793</td>
<td>194</td>
</tr>
<tr>
<td>* 5</td>
<td>921</td>
<td>225</td>
</tr>
</tbody>
</table>

*For information regarding additional family sizes, see Supplement 1 to Attachment 2.6-A, Page 1.1.

2. Pregnant Women and Infants under Section 1902(a)((10)(i)(IV) of the Act:

Effective April 1, 1990, based on the following percent of the official Federal Income poverty level--

/\ 133 percent /_/ \ percent (no more than 185 percent)

(specify)

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>$</td>
</tr>
<tr>
<td>3</td>
<td>$</td>
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<tr>
<td>4</td>
<td>$</td>
</tr>
<tr>
<td>5</td>
<td>$</td>
</tr>
</tbody>
</table>

For this group, the income eligibility level is 133 percent of the Federal Poverty Level (as revised annually in the Federal Register) for the size family involved.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: ALABAMA

TITLE IV-A AGENCY RESPONSIBLE FOR ELIGIBILITY DETERMINATION

STANDARDS FOR AID TO FAMILIES WITH DEPENDENT CHILDREN

<table>
<thead>
<tr>
<th>BUDGET SIZE</th>
<th>NEED STANDARD</th>
<th>PAYMENT STANDARD</th>
<th>INCOME CAP STANDARD</th>
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<tr>
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<td>111</td>
<td>845</td>
</tr>
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<td>2</td>
<td>563</td>
<td>137</td>
<td>1042</td>
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<tr>
<td>3</td>
<td>673</td>
<td>164</td>
<td>1245</td>
</tr>
<tr>
<td>4</td>
<td>793</td>
<td>194</td>
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<td>5</td>
<td>921</td>
<td>225</td>
<td>1704</td>
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<td>6</td>
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<td>2385</td>
</tr>
<tr>
<td>9</td>
<td>1405</td>
<td>344</td>
<td>2599</td>
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<td>10</td>
<td>1520</td>
<td>372</td>
<td>2812</td>
</tr>
<tr>
<td>11</td>
<td>1635</td>
<td>400</td>
<td>3025</td>
</tr>
<tr>
<td>12</td>
<td>1751</td>
<td>428</td>
<td>3239</td>
</tr>
<tr>
<td>13</td>
<td>1866</td>
<td>457</td>
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<td>14</td>
<td>1981</td>
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<td>3879</td>
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<tr>
<td>16</td>
<td>2212</td>
<td>541</td>
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</table>

TN No. AL-92-19 Approval Date 02/05/93 Effective Date 10-01-92
Supersedes
TN No. AL-91-38
Family Needs Allowance

Spouse Only

The current Federal Benefit Rate will be used as the needs allowance for the spouse at home. Any income of the spouse at home will be deducted from the standard to determine allocation. If the spouse at home has no income, the standard will be allocated. If the income of the institutionalized spouse is below the standard, the entire income will be allocated except for the protected personal needs allowance and the veterans aid and attendance allowance.

Other Family Members

When there are other family members, the AFDC standard will be used. The total number of family members at home will be computed against this table. This standard will be used when there are other family members even though in some instances the needs allowance will be less than that of a spouse only. Any income of the family at home will be deducted from the standard to determine allocation. If the family at home has no income, the standard will be allocated. If the income of the institutionalized spouse is below the standard, the entire income will be allocated except for the protected personal needs allowance and the veterans aid and attendance. The AFDC definition of family units will be used in determining who is a family member.

<table>
<thead>
<tr>
<th>Number of Family Member When No Spouse Only</th>
<th>Family Needs Allowance</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>59</td>
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<td>9</td>
<td>295</td>
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<td>10</td>
<td>324</td>
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<td>11</td>
<td>354</td>
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<td>383</td>
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<td>13</td>
<td>413</td>
</tr>
<tr>
<td>14</td>
<td>442</td>
</tr>
<tr>
<td>15</td>
<td>472</td>
</tr>
</tbody>
</table>
STATE-ADMINISTERED OPTIONAL STATE SUPPLEMENT: PAYMENT GROUPS:
INCOME LEVELS: ADDITIONAL DISREGARDS: ADDITIONAL ELIGIBILITY CRITERIA:

MEDICAL INSTITUTIONS SKILLED NURSING
FACILITIES AND INTERMEDIATE CARE FACILITIES
STATE: ALABAMA

<table>
<thead>
<tr>
<th>MORE PAYMENT CATEGORIES</th>
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<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
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<tbody>
<tr>
<td>INDIVIDUAL</td>
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<tr>
<td>COUPLE</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Gross</th>
<th>Net</th>
<th>Gross</th>
<th>Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>SKILLED NURSING</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>FACILITY MENTAL</td>
<td>300% of SSI FBR</td>
<td>300% of SSI FBR</td>
<td>300% of SSI FBR x 2</td>
<td>300% of SSI FBR x 2</td>
</tr>
<tr>
<td>HOSPITAL TUBERCULOSIS</td>
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<tr>
<td>INTERMEDIATE CARE</td>
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<tr>
<td>FACILITY &amp; INTER-</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>MEDIATE CARE</td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>FACILITY FOR THE</td>
<td></td>
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<tr>
<td>MENTALLY RETARDED</td>
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TN# AL-04-08
Supersedes
TN# AL-04-04
Approval Date 09/10/2004
Effective Date 07/01/2004
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

INCOME ELIGIBILITY LEVELS

A. MANDATORY CATEGORICALLY NEEDY (Continued)

3. 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).

4. For children under Section 1902(a)(10)(A)(i)(VII) of the Act (children who were born after September 30, 1983 and 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.
B. OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women and Infants

The levels for determining income eligibility for optional groups of pregnant women and infants under the provisions of sections 1902(a)(10)(A)(ii)(IX) and 1902(1)(2) of the Act are as follows:

Based on _____ percent of the official Federal income poverty level (more than 133 percent and no more than 185 percent).

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$</td>
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<tr>
<td>2</td>
<td>$</td>
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<tr>
<td>3</td>
<td>$</td>
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<tr>
<td>4</td>
<td>$</td>
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<tr>
<td>5</td>
<td>$</td>
</tr>
</tbody>
</table>
B. MANDATORY CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. Children Under Age 19

The levels for determining income eligibility for groups of children who are born after September 30, 1983 under the provisions of section 1902(1)(2) of the Act are as follows:

Based on **100** percent of the official Federal income poverty line.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$</td>
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<tr>
<td>2</td>
<td>$</td>
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<tr>
<td>3</td>
<td>$</td>
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<tr>
<td>4</td>
<td>$</td>
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<tr>
<td>5</td>
<td>$</td>
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<td>$</td>
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<tr>
<td>9</td>
<td>$</td>
</tr>
<tr>
<td>10</td>
<td>$</td>
</tr>
</tbody>
</table>

For this group, the income eligibility level is **100** percent of the Federal Poverty Level (as revised annually in the Federal Register) for the size family involved.

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TN No. AL-91-36  
Supersedes TN No. AL-91-2  
Approval Date 10-02-92  
Effective Date 01-01-92  
HCFA ID: 7985E
D. INCOME ELIGIBILITY LEVEL - MANDATORY GROUP OF QUALIFIED DISABLED WORKING INDIVIDUALS

The income of Qualified Disabled Working Individuals will not exceed 200 percent of the Federal Poverty Level.

The poverty levels by family size are published in the Federal Register annually and will be made effective upon publication.
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)(l) of the Act are as follows:

Based on _____ percent of the official Federal income poverty line.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$___________</td>
</tr>
<tr>
<td>2</td>
<td>$___________</td>
</tr>
<tr>
<td>3</td>
<td>$___________</td>
</tr>
<tr>
<td>4</td>
<td>$___________</td>
</tr>
<tr>
<td>5</td>
<td>$___________</td>
</tr>
</tbody>
</table>

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

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

For individuals not receiving title II income, the revised poverty levels are effective no later than the beginning of the month following the date of publication.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

INCOME ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

The levels for determining income eligibility for groups of qualified Medicare beneficiaries under the provisions of section 1905(p)(2)(A) of the Act are as follows:

1. NON-SECTION 1902(f) STATES

a. Based on the following percent of the official Federal income poverty level:
   
   Eff. Jan. 1, 1989: 85 percent (no more than 100)
   
   Eff. Jan. 1, 1990: 100 percent (no more than 100)
   
   Eff. Jan. 1, 1991: 100 percent
   
   Eff. Jan. 1, 1992: 100 percent

b. Levels:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$_______</td>
</tr>
<tr>
<td></td>
<td>$_______</td>
</tr>
</tbody>
</table>

For this group, the income eligibility level is 100 percent of the Federal Poverty Level (as revised annually in the Federal Register) for the size family involved.

TN No. AL-91-36
Supersedes TN No.
Approval Date 10-02-92  Effective Date 01-01-92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

INCOME ELIGIBILITY LEVELS (Continued)

C. QUALIFIED MEDICARE BENEFICIARIES WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

2. SECTION 1902(f) STATES WHICH AS OF JANUARY 1, 1989 USED INCOME STANDARDS MORE RESTRICTIVE THAN SSI

a. Based on the following percent of the official Federal income poverty level:

Eff. Jan. 1, 1989: / / 80 percent / / _______ percent (no more than 100)

Eff. Jan. 1, 1990: / / 85 percent / / _______ percent (no more than 100)

Eff. Jan. 1, 1991: / / 95 percent / / _______ percent (no more than 100)

Eff. Jan. 1, 1992: 100 percent

b. Levels:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Income Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>$</td>
</tr>
</tbody>
</table>

TN No. AL-91-36
Supersedes
TN No. ________

Approval Date 10-02-92 Effective Date 01-01-92

HCFA ID: 7985E
INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

Applicable to all groups.

Applicable to all groups except those specified below. Excepted group income levels are also listed on an attached page 3.

<table>
<thead>
<tr>
<th>Family which Size</th>
<th>Net income level protected for maintenance for months</th>
<th>Amount by which Column (2) for persons exceeding limits specified in 42 CFR months</th>
<th>Net income level Amount by Column (4) for persons living in rural areas for specified in 42 CFR months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Urban only</td>
<td></td>
<td>$435.100717</td>
<td></td>
</tr>
<tr>
<td>Urban &amp; rural</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>3</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>4</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

For each additional person, add $1

$1

The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.
D. MEDICALLY NEEDY

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Net income level</th>
<th>Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007</th>
<th>Net income level</th>
<th>Amount by Column (4) exceeds limits specified in 42 CFR 435.1007</th>
</tr>
</thead>
<tbody>
<tr>
<td>urban only</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>$</td>
<td></td>
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<td>6</td>
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</tr>
<tr>
<td>urban &amp; rural</td>
<td></td>
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</tr>
</tbody>
</table>

For each additional person, add:

1/ The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

INCOME LEVELS (Continued)

E. Optional Groups Other Than the Medically Needy

1. Institutionalized Individuals Under Special Income Levels as follows:

Individuals with income below 300% of the SSI Federal Benefit Rate for an individual living in his own home with no income.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

RESOURCE LEVELS

A. CATEGORICALLY NEEDY GROUPS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

1. Pregnant Women

   a. Mandatory Groups

      Same as SSI resources levels.

      Less restrictive than SSI resource levels and is as follows:

      | Family Size | Resource Level |
      |-------------|---------------|
      | 1           |               |
      | 2           |               |

   b. Optional Groups

      Same as SSI resources levels.

      Less restrictive than SSI resource levels and is as follows:

      | Family Size | Resource Level |
      |-------------|---------------|
      | 1           |               |
      | 2           |               |

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Supersedes TN No. AL-87-14
Approval Date 10-02-92 Effective Date 01-01-92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

2. Infants

a. Mandatory Group of Infants

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

Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
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<td>2</td>
<td></td>
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</table>

Supersedes

TN No. AL-87-14

Approval Date 10-02-92 Effective Date 01-01-92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

b. Optional Group of Infants

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

Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>2</td>
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TN No. AL-91-36
Supersedes TN No. AL-87-14

Approval Date 10-02-92   Effective Date 01-01-92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

3. Children

   a. Mandatory Group of Children under Section 1902(a)(10)(A)(i)(VI) of the Act. (Children who have attained age 1 but have not attained age 6.)

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

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

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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</table>

TN No. AL-91-36
Supersedes
TN No. _____
Approval Date 10-02-92
Effective Date 01-01-92
HCFA ID: 7985E
b. Optional Group of Children

- Same as resource levels in the State's approved AFDC plan.
- Less restrictive than the AFDC levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
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<tbody>
<tr>
<td>1</td>
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</tbody>
</table>
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

4. Aged and Disabled Individuals

☐ Same as SSI resource levels.

☐ More restrictive than SSI levels and are as follows:

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
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<tbody>
<tr>
<td>1</td>
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<td>4</td>
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<td>5</td>
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</tbody>
</table>

☐ Same as medically needy resource levels (applicable only if State has a medically needy program)
**B. MEDICALLY NEEDY**

Applicable to all groups -

Except those specified below under the provisions of section 1902(f) of the Act.

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource Level</th>
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<tbody>
<tr>
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</tbody>
</table>

For each additional person

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TN No. AL-91-36
Supersedes
TN No.       Approval Date 10-02-92 Effective Date 01-01-92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

REASONABLE LIMITS ON AMOUNTS FOR NECESSARY MEDICAL OR REMEDIAL CARE NOT COVERED BY MEDICAID OR ANY THIRD PARTY

CITATION
435.725(C) (4) (ii)

A deduction will be allowed from an individual’s income for incurred expenses for medical or remedial care that are not subject to payment by a third party, including (1) Medicare and other health insurance premiums, deductibles, or coinsurance charges; and (2) medically necessary medical or remedial care recognized under State law but not covered under the State’s Medicaid plan, subject to reasonable limits the agency may establish on amounts of these expenses.

The State sets reasonable limits as follows:

A deduction for expenses incurred for medically necessary non-covered medical or remedial care will be allowed based on the lesser of the Medicaid rate, the Medicare rate, or reasonable and customary charges.

A deduction for incurred medically necessary non-covered medical or remedial care expenses will be allowed when the bill is incurred during a period which is no more than three months prior to the month of current application.

The deduction for medical and remedial care expenses that were incurred as the result of a transfer penalty period is limited to zero.

A deduction for initial or replacement dentures will be allowed for those meeting Agency established medical necessity criteria.

A deduction for hearing aids will be allowed for those meeting Agency established medical necessity criteria.

TN No.: 06-002
Supersedes

Approval Date: 07/18/06
Effective Date: 04/01/06
HCFA ID: 4093E/0002P
RESOURCE LEVELS FOR THE MEDICALLY NEEDY

Applicable to all groups

<table>
<thead>
<tr>
<th>Family Size</th>
<th>Resource level</th>
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</tbody>
</table>

For each additional person

Effective Date 4-30-85

Supersedes

MCFA ID: 0004P/0102A
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

METHODS FOR TREATMENT OF INCOME THAT DIFFER FROM THOSE OF THE SSI PROGRAM

(Section 1902(f) more restrictive methods and criteria and State supplement criteria in SSI criteria States without section 1634 agreements and in section 1902(f) States. Use to reflect more liberal methods only if you limit to State supplement recipients. DO NOT USE this supplement to reflect more liberal policies that you elect under the authority of section 1902(r)(2) of the Act. Use Supplement 8a for section 1902(r)(2) methods.)
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

MORE RESTRICTIVE METHODS OF TREATING RESOURCES
THAN THOSE OF THE SSI PROGRAM - Section 1902(f) States only

TN No. AL-91-36
Supersedes
TN No. AL-87-14

Approval Date 10-02-92
Effective Date 01-01-92
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

METHODS FOR TREATMENT OF RESOURCES FOR INDIVIDUALS WITH INCOMES RELATED TO FEDERAL POVERTY LEVELS

(Do not complete if you are electing more liberal methods under the authority of section 1902(r)(2) of the Act instead of the authority specific to Federal poverty levels. Use Supplement 8b for section 1902(r)(2) methods.)

Approval Date 10-02-92 Effective Date 01-01-92
HCFA ID: 7985E
## STATE ALABAMA
### STANDARDS FOR OPTIONAL STATE SUPPLEMENTARY PAYMENTS

<table>
<thead>
<tr>
<th>Payment Category (Reasonable Classification)</th>
<th>Administered By Federal / State</th>
<th>Gross Income Individual</th>
<th>Payment Level Individual</th>
<th>Income Disregards Employed</th>
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</thead>
<tbody>
<tr>
<td>(1) <em>Living in home with personal or nursing care</em></td>
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<td></td>
<td></td>
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<tr>
<td>Living Arrangement &quot;A&quot;</td>
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<tr>
<td>Individual--Level 1</td>
<td>X</td>
<td>300% of SSI FBR</td>
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<tr>
<td>Level 2</td>
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<tr>
<td>Nursing Care</td>
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<td>Couple--Level 1</td>
<td>X</td>
<td>300% of SSI FBR x 2</td>
<td>120</td>
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</tr>
<tr>
<td>Level 2</td>
<td>X</td>
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<td>112</td>
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<tr>
<td>Nursing Care</td>
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<td>Living Arrangement &quot;B&quot;</td>
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<tr>
<td>Individual--Level 1</td>
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<td>300% of SSI FBR</td>
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<td>Level 2</td>
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<td>Nursing Care</td>
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<td>Couple--Level 1</td>
<td>X</td>
<td>300% of SSI FBR x 2</td>
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<td>Level 2</td>
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<td>Nursing Care</td>
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<td>Living in Foster Care with personal or nursing care</td>
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<td><strong>Cerebral palsy treatment center</strong></td>
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<td>Couple</td>
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<td>300% of SSI FBR x 2</td>
<td>392</td>
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</table>

*Needs considered and payment made are in addition to SSI FBR
**Disabled only
(Level 1 Bedfast & Chairfast) (Level 2 Ambulatory)

TN # AL-04-08
Supersedes TN # AL-04-04

Approval Date 09/10/2004
Effective Date 07/01/2004
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

INCOME LEVELS FOR 1902(f) STATES - CATEGORICALLY NEEDY WHO ARE COVERED UNDER REQUIREMENTS MORE RESTRICTIVE THAN SSI

TN No. AL-91-36
Supersedes 01-01-92
TN No. AL-85-9

Approval Date 10-02-92
Effective Date 11/1/92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

RESOURCE STANDARDS FOR 1902(f) STATES - CATEGORICALLY NEEDY

TN No. AL-91-36
Supersedes 01-01-92
TN No. ______

Approval Date 10-02-92 Effective Date 1/1/92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

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

Section 1902(f) State \(\checkmark\) Non-Section 1902(f) State

The consideration of in-kind support and maintenance in the income calculation is waived for determining eligibility of individuals and couples as Qualified Medicare Beneficiaries and Specified Low Income Medicare Beneficiaries.

Fluctuating income may be averaged for the past six months and projected for twelve months for determining eligibility of individuals and couples as Qualified Medicare Beneficiaries and Specified Low Income Medicare Beneficiaries.

Income will not be deemed from parents to pregnant women in determining the eligibility of individuals as pregnant women, infants, and children with income under the Federal Poverty Level.

For children under age 19 covered under the provisions of section 1902(a)(10)(A)(ii)(I), the following more liberal income methodologies are used to determine eligibility:

- All applicants and recipients with earnings will receive the earned income disregard of $30 and a 1/3 of the remainder for 12 consecutive months.

- Net income for self-employment and farming will be calculated using Schedule C and Schedule F respectively.

- $1 will be disregarded for all applicants and recipients.

*More liberal methods may not result in exceeding gross income limitations under section 1903(f).
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

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

Section 1902(f) State X Non-Section 1902(f) State

Federal and State tax refunds and refundable tax credits are excluded as income for the following eligibility groups:


X Poverty level pregnant women and infants (133 – 185% FPL) under 1902(a)(10)(A)(i)(IV).

X Poverty level children aged 1 up to age 6 (133% FPL) under 1902(a)(10)(A)(i)(VI).

X Poverty level children aged 6 up to age 19 (100% FPL) under 1902(a)(10)(A)(i)(VII).

X Optional categorically needy groups under 1902(a)(10)(A)(ii) as listed below.

Children receiving adoption subsidy payments under 1902(a)(10)(A)(ii)(VIII)

Adolescents in state foster care under 1902(a)(10)(A)(ii)(I)

Individuals receiving state supplementary payment based on need under 1902(a)(10)(A)(ii)(XI)


X All aged, blind or disabled groups in 209(b) states under 1902(f).

X QMBs, SLMBs and QIs under 1905(p),

TN No. AL-10-005
Supersedes Approval Date 05-14-10 Effective Date 04/01/2010
TN No. New
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

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

Section 1902 (f) State   Non-Section 1902 (f) State

The purpose of the State Plan Amendment is to use the authority of section 1902(r)(2) of the Act to have a block income disregard between the current net income standard of 100% FPL and a gross income standard of 141% for the mandatory poverty-level related group of children aged 6 through 18 under section 1902(a)(10)(A)(i)(VII) of the Act. The State Plan Amendment will allow for the alignment of income standards for all children regardless of age.

TN No: AL-13-019
Supersedes
TN No. New

Approval Date: 11-19-13  Effective Date: 12/31/2013
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

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

X. For all eligibility groups not subject to the limitations on payment explained in Section 1903(f) of the Act*: All wages paid by the Census Bureau for temporary employment related to Census 2000 activities are excluded.

*Less restrictive methods may not result in exceeding gross income limitations under Section 1903(f).

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TN No. AL-00-01
Supersedes
TN No. NEW
Approval Date 05/16/00 Effective Date 01/01/00
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

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

( ) Section 1902 (f) State (X) Non-Section 1902 (f) State

The following are more liberal resource requirements than SSI for determining eligibility of individuals under the provision of 42-CFR 435.211 and 435.236.

All resources of the applicant and spouse of the applicant are excluded for the QMB, SLMB, QI-1 and QI-2 cases.

Interest and dividend income is excluded for QMB, SLMB, QI-1 and QI-2 cases.

The consideration of life estate interest in real property is waived for the institutional type cases.

Personal effects such as clothing, jewelry, furniture, etc. are excluded up to $4000 for the institutional type cases.

The required net annual income of 6 percent is waived for the excluded $6000 in equity value in income-producing property essential to self-support for the institutional type cases.

The cash value of life insurance policies with combined face value of $5000 or less is excluded for institutional type cases.

The burial fund exclusion is $5000 for institutional type cases.

Commingling of burial funds is allowed for institutional type cases.

TN No. AL-99-07
Supersedes TN No. AL-99-04
Approval Date 07-28-99 Effective Date 08-01-99
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

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

Medicaid will not consider resources of a person equal to the amount of long-term care insurance benefit payments in determining Medicaid eligibility when the long-term care insurance policy covers at least the first three years of nursing home care and/or home health care services.

The exclusion shall be for the life of the purchaser provided he or she maintains obligations pursuant to the long-term care insurance policy.

Insurance benefit payments made on behalf of a claimant, for payment of long-term care services, shall be considered to be expenditures of resources as required for eligibility for medical assistance to the extend that the payments are all of the following:

(1) For services Medicaid approves or covers for its recipients.
(2) In an amount not in excess of the charges of the health services provider.
(3) For nursing home care and/or home health care services.
(4) For services provided after the person meets the coverage requirements for long-term care benefits established by the agency for this program.

For children under age 19 covered under the provisions of section 1902(a)(10)(A)(ii)(I), all resources are excluded.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

The following more liberal methodology applies to individuals who are eligible for medical assistance under one of the following eligibility groups:

Institutionalized individuals

An individual who is a beneficiary under a long-term care insurance policy that meets the requirements of a “qualified State long-term care insurance partnership” policy (partnership policy) as set forth below, is given a resource disregard as described in this amendment. The amount of the disregard is equal to the amount of the insurance benefit payments made to or on behalf of the individual. The term “long-term care insurance policy” includes a certificate issued under a group insurance contract.

The Alabama Medicaid Agency (Agency) stipulates that the following requirements will be satisfied in order for a long-term care policy to qualify for a disregard. Where appropriate, the Agency relies on attestations by the Alabama Department of Insurance Commissioner (Commissioner) or other State official charged with regulation and oversight of insurance policies sold in the state, regarding information within the expertise of the Alabama Department of Insurance:

- The policy is a qualified long-term care insurance policy as defined in section 7702B(b) of the Internal Revenue Code of 1986.
- The policy meets the requirements of the long-term care insurance model regulation and long-term care insurance model Act promulgated by the National Association of Insurance Commissioners (as adopted as of October 2000) as those requirements are set forth in section 1917(b)(5)(A) of the Social Security Act.

TN No: 08-005
Supersedes Approval Date: 02/06/09
TN No: New Effective Date: 03/01/09
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

STATE LONG-TERM CARE INSURANCE PARTNERSHIP

- The policy was issued no earlier than the effective date of this State Plan amendment.

- The insured individual was a resident of a Partnership State when coverage first became effective under the policy. If the policy is later exchanged for a different long-term care policy, the individual was a resident of a Partnership State when coverage under the earliest policy became effective.

- The policy meets the inflation protection requirements set forth in section 1917(b)(1)(C)(iii)(IV) of the Social Security Act.

- The Commissioner requires the issuer of the policy to make regular reports to the Secretary that include notification regarding when benefits provided under the policy have been paid and the amount of such benefits paid, notification regarding when the policy otherwise terminates, and such other information as the Secretary determines may be appropriate to the administration of such partnerships.

- Alabama does not impose any requirement affecting the terms or benefits of a partnership policy that the state does not also impose on non-partnership policies.

- The Alabama Department of Insurance assures that any individual who sells a partnership policy receives training, and demonstrates evidence of an understanding of such policies and how they relate to other public and private coverage of long-term care.

- The Agency provides information and technical assistance to the Alabama Department of Insurance regarding the training described above.

TN No: 08-005
Supersedes Approval Date: 02/06/09 Effective Date: 03/01/09
TN No: New
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

TN No. AL-91-36
Supers Approval Date 10-02-92 Effective Date 01-01-92
TN No. AL-86-7

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

TN No. AL-91-36
Supersedes TN No. AL-86-7

Approval Date 10-02-92 Effective Date 01-01-92

HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

TN No. AL-91-36
Supersedes Approval Date 10-02-92 Effective Date 01-01-92
TN No. AL-86-7
HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

1917(c) The agency provides for the denial of certain Medicaid services by reason of disposal of assets for less than fair market value.

1. Institutionalized individuals may be denied certain Medicaid services upon disposing of assets for less than fair market value on or after the look-back date.

The agency withholds payment to institutionalized individuals for the following services:

- Payments based on a level of care in a nursing facility;
- Payments based on a nursing facility level of care in a medical institution;
- Home and community-based services under a 1915 waiver.

2. Non-institutionalized individuals:

The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

The agency withholds payment to non-institutionalized individuals for the following services:

- Home health services (section 1905(a)(7))
- Home and community care for functionally disabled and elderly adults (section 1905(a)(22));
- Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

The following other long-term care services for which medical assistance is otherwise under the agency plan:

TN No. AL-95-17 Approval Date 07-31-95 Effective Date 07/01/95
Supersedes
TN No. NEW
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

3. **Penalty Date**--The beginning date of each penalty period imposed for an uncompensated transfer of assets is:
   - [ ] the first day of the month in which the asset was transferred;
   - [X] the first day of the month following the month of transfer.

4. **Penalty Period - Institutionalized Individuals**--
   In determining the penalty for an institutionalized individual, the agency uses:
   - [X] The average monthly cost of a private patient of nursing facility services in the agency;
   - [ ] The average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized.

5. **Penalty Period - Non-institutionalized Individuals**--
   The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual including the use of the average monthly cost of nursing facility services;
   - [ ] imposes a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:

**TN No. AL 04-05** Approval Date 05/17/2004 Effective Date 07/01/2004
Supersedes
TN No. AL-95-17
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

6. **Penalty period for amounts of transfer less than cost of nursing facility care**--
   
a. Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency:
   
   - \( \square \) does not impose a penalty;
   
   \( \square \) imposes a penalty for less than a full month, based on the proportion of the agency's private nursing facility rate that was transferred.

b. Where an individual makes a series of transfers, each less than the private nursing facility rate for a month, the agency:
   
   - \( \square \) does not impose a penalty;
   
   \( \square \) imposes a series of penalties, each for less than a full month.

7. **Transfers made so that penalty periods would overlap**--
   The agency:
   
   - \( \square \) totals the value of all assets transferred to produce a single penalty period;
   
   \( \square \) calculates the individual penalty periods and imposes them sequentially.

8. **Transfers made so that penalty periods would not overlap**--
   The agency:
   
   - \( \square \) assigns each transfer its own penalty period;
   
   \( \square \) uses the method outlined below:

---

TN No. AL 04-05  Approval Date 05/17/2004  Effective Date 07/01/2004

Supersedes
TN No. AL-95-17
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

9. Penalty periods - transfer by a spouse that results in a penalty period for the individual--

(a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

* Any remaining penalty period will be divided equally between the two spouses beginning the month the Community Spouse becomes Medicaid eligible as an institutional or home and community based waiver services recipient.

* If there is an odd number of months remaining in the penalty period the spouse institutionalized first will serve a penalty one month longer than the other spouse.

* The total penalty imposed on both spouses cannot exceed the length of the penalty originally imposed on the individual.

(b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

10. Treatment of income as an asset--

When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

__ The agency will impose partial month penalty periods.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

__ For transfers of individual income payments, the agency will impose partial month penalty periods.

X For transfers of the right to an income stream, the agency will use the actuarial value of all payments transferred.

__ The agency uses an alternate method to calculate penalty periods, as described below:

TN No. AL-95-17 Approval Date 07-31-95 Effective Date 07/01/95
Supersedes
TN No. NEW
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

11. Imposition of a penalty would work an undue hardship --

The agency does not apply the transfer of assets provisions in any case in which the agency determines that such an application would work an undue hardship. The agency will use the following procedures in making undue hardship determinations:

Upon a determination of a transfer of assets for less than fair market value that requires imposition of a transfer penalty the Agency will:

1. Send written notices which informs the individual and authorized representative (if one) of the transfer penalty; and

2. Send a copy of the Administrative Code Rule 560-X-25-.09 which informs the individual and authorized representative of the right to request an undue hardship exemption; and

3. Send a copy of the notice which informs the individual and authorized representative (if one) of the right to appeal the decision made by the Alabama Medicaid Agency.

4. The written request for an undue hardship exemption must be received by Medicaid within 60 days from the date the notice of action is mailed. The District Office will gather all pertinent information/documentation and forward to the Central Office with an interpretation request form.

5. The appropriate Director of Beneficiary Services will review all pertinent information/documentation to determine if the criteria for an undue hardship exemption have been met.

6. The individual and authorized representative (if one) will be notified in writing within 45 days of receipt of the request for exemption of the Agency’s determination of whether undue hardship criteria have been met. If the undue hardship exemption is denied, another copy of Administration Code Rule 560-X-25-.09 and another copy of the notice of appeal rights will be sent.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

7. Upon notification by the individual or authorized representative (if one) of a request to appeal a denial of an undue hardship exemption a fair hearing will be scheduled in accordance with chapter three of the Alabama Medicaid Agency's Administrative Code.

The following criteria will be used to determine whether the agency will not count assets transferred because the penalty would work an undue hardship:

In situations where an individual has admitted that an asset has been transferred for less than fair market value for the purpose of obtaining Medicaid benefits the Agency may still grant an exemption from the transfer of asset penalty where the individual demonstrates by clear and convincing evidence that the imposition of such a penalty will cause the individual to suffer undue hardship. Undue hardship will only be considered in extreme cases where the individual has been denied admission to or discharged from an institutional facility or denied home and community based waiver services which are necessary to preserve the individual's life. Undue hardship does not exist where a transfer penalty causes an individual to experience inconvenience or would cause an individual to restrict their lifestyle but would not place the individual at serious risk of being deprived of care of services necessary to sustain life.

In determining the existence of undue hardship the Agency will consider all circumstances involving the transfer and the situation of the individual, including, but not limited to, the following:

1. Whether the individual has been determined to be a person in need of care and protection pursuant to the Adult Protective Services Act, Code of Alabama 1975, section 38-9-1, et seq.

2. Whether the individual or his representative has exhausted all reasonable efforts to obtain a return of or compensation for the transferred asset, including voiding the transfer pursuant to Code of Alabama 1975, section 35-1-2 or section 8-9-12, or pursuing any other criminal or civil action available to recover the asset; and
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

3. Whether the individual was defrauded of the transferred asset, which is documented by a court action or an official police report; and

4. Whether the individual or his representative has exhausted all reasonable efforts to meet the individual's needs from other available sources.
TRANSFER OF ASSETS

FOR TRANSFERS OF ASSETS FOR LESS THAN FAIR MARKET VALUE MADE ON OR AFTER FEBRUARY 8, 2006, the agency provides for the denial of certain Medicaid services.

1. Institutionalized individuals are denied coverage of certain Medicaid services upon disposing of assets for less than fair market value on or after the lookback date.

The agency does not provide medical assistance coverage for institutionalized individuals for the following services:

- Nursing facility services;
- Nursing facility level of care provided in a medical institution;
- Home and community-based services under a 1915(c) or (d) waiver.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

2. Non-institutionalized individuals:

The agency applies these provisions to the following non-institutionalized eligibility groups. These groups can be no more restrictive than those set forth in section 1905(a) of the Social Security Act:

The agency withholds payment to non-institutionalized individuals for the following services:

1. Home health services (section 1905(a)(7));
2. Home and community care for functionally disabled elderly adults (section 1905(a)(22));
3. Personal care services furnished to individuals who are not inpatients in certain medical institutions, as recognized under agency law and specified in section 1905(a)(24).

The following other long-term care services for which payment for medical assistance is otherwise made under the agency plan:
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

3. Penalty Date--The beginning date of each penalty period imposed for an uncompensated transfer of assets is the later of:

- the first day of a month during or after which assets have been transferred for less than fair market value;

- The State uses the first day of the month in which the assets were transferred

X The State uses the first day of the month after the month in which the assets were transferred

or

- the date on which the individual is eligible for medical assistance under the State plan and is receiving institutional level care services described in paragraphs 1 and 2 that, were it not for the imposition of the penalty period, would be covered by Medicaid;

AND

which does not occur during any other period of ineligibility for services by reason of a transfer of assets penalty.

TN No. AL-06-005
Supersedes
TN No. NEW

Approval Date 2/20/07 Effective Date 12/01/06
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

4. Penalty Period - Institutionalized Individuals--
In determining the penalty for an institutionalized individual, the agency uses:

   X  the average monthly cost to a private patient of nursing facility services in the State at the time of application;

   ___ the average monthly cost to a private patient of nursing facility services in the community in which the individual is institutionalized at the time of application.

5. Penalty Period - Non-institutionalized Individuals--
The agency imposes a penalty period determined by using the same method as is used for an institutionalized individual, including the use of the average monthly cost of nursing facility services;

   ___ imposes a shorter penalty period than would be imposed for institutionalized individuals, as outlined below:

6. Penalty period for amounts of transfer less than cost of nursing facility care--

   Where the amount of the transfer is less than the monthly cost of nursing facility care, the agency imposes a penalty for less than a full month, based on the option selected in item 4.

   The state adds together all transfers for less than fair market value made during the look-back period in more than one month and calculates a single period of ineligibility, that begins on the earliest date that would otherwise apply if the transfer had been made in a single lump sum.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

7. Penalty periods - transfer by a spouse that results in a penalty period for the individual:

(a) The agency apportions any existing penalty period between the spouses using the method outlined below, provided the spouse is eligible for Medicaid. A penalty can be assessed against the spouse, and some portion of the penalty against the individual remains.

(b) If one spouse is no longer subject to a penalty, the remaining penalty period must be served by the remaining spouse.

8. Treatment of a transfer of income—

When income has been transferred as a lump sum, the agency will calculate the penalty period on the lump sum value.

When a stream of income or the right to a stream of income has been transferred, the agency will impose a penalty period for each income payment.

For transfers of individual income payments, the agency will impose partial month penalty periods using the methodology selected in 6. above.

For transfers of the right to an income stream, the agency will base the penalty period on the combined actuarial value of all payments transferred.

TN No. AL-06-005
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TN No. NEW

Approval Date 2/20/07
Effective Date 12/01/06
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

9. **Imposition of a penalty would work an undue hardship**--

The agency does not impose a penalty for transferring assets for less than fair market value in any case in which the agency determines that such imposition would work an undue hardship. The agency will use the following criteria in making undue hardship determinations:

Application of a transfer of assets penalty would deprive the individual:

(a) Of medical care such that the individual's health or life would be endangered; or

(b) Of food, clothing, shelter, or other necessities of life.

10. **Procedures for Undue Hardship Waivers**

The agency has established a process under which hardship waivers may be requested that provides for:

(a) Notice to a recipient subject to a penalty that an undue hardship exception exists;

(b) A timely process for determining whether an undue hardship waiver will be granted; and

(c) A process, which is described in the notice, under which an adverse determination can be appealed.

These procedures shall permit the facility in which the institutionalized individual is residing to file an undue hardship waiver application on behalf of the individual with the consent of the individual or the individual's personal representative.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

TRANSFER OF ASSETS

11. Bed Hold Waivers For Hardship Applicants

The agency provides that while an application for an undue hardship waiver is pending in the case of an individual who is a resident of a nursing facility:

Payments to the nursing facility to hold the bed for the individual will be made for a period not to exceed ___ days (may not be greater than 30).

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Supersedes
TN No. NEW

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Effective Date 12/01/06
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: __________ __ __ ______

The agency does not apply the trust provisions in any case in which the agency determines that such an application would work an undue hardship. The agency will use the following procedures in making undue hardship determinations:

Upon a determination that application of the trust provisions will result in the denial of eligibility, the agency will:

1. Send written notices which inform the individual and authorized representative (if one) of the denial; and

2. Send a copy of Administrative Code Rules 560-X-25-.06 and 560-X-25-.09 which informs the individual and authorized representative (if one) that an undue hardship exemption policy exists; and

3. Send a copy of the notice which informs the individual and authorized representative (if one) of the right to appeal the decision made by the Alabama Medicaid Agency.

4. Upon receipt of a request (within 60 days after the date the agency's notice is received) from the individual or authorized representative (if one) for an exemption because of undue hardship, the agency will determine if an undue hardship exemption should be granted. The District Office will gather all pertinent information/documentation and forward to the Central Office with an interpretation request form.

5. The Central Office Certification Support Division Director, the Policy Unit Coordinator, and the Agency Legal Counsel will review all pertinent information/documentation to determine if the criteria for an undue hardship exemption has been met.

6. The individual and authorized representative (if one) will be notified in writing (within 45 days of receipt of the request for exemption) upon a determination of whether undue hardship criteria has been met. If the undue hardship exemption is denied, another copy of Administrative Code Rules 560-X-25-.06 and 560-X-25-.09, and another copy of the notice of appeal rights will be sent.

7. Upon notification by the individual or authorized representative (if one) of a request to appeal a denial of an undue hardship exemption, a fair hearing will be scheduled in accordance with chapter three of the Alabama Medicaid Agency's Administrative Code.
The following criteria will be used to determine whether the agency will not apply the trust provisions because doing so would work an undue hardship:

In situations where an individual has admitted that a trust has been established for the purpose of obtaining Medicaid benefits, the agency may still grant an exemption from the application of the trust provisions where the individual demonstrates by clear and convincing evidence that the imposition of such a penalty will cause the individual to suffer undue hardship. Undue hardship will only be considered in extreme cases where the individual has been denied admission to or discharged from an institutional facility or denied home and community based waiver services which are necessary to preserve the individual's life. Undue hardship does not exist where a denial of eligibility causes an individual to experience inconvenience or would cause an individual to restrict their lifestyle but would not place the individual at serious risk of being deprived of care of services necessary to sustain life.

In determining the existence of undue hardship the agency will consider all circumstances involving the trust and the situation of the individual, including, but not limited to, the following:

1. Whether the individual has been determined to be a person in need of care and protection pursuant to the Adult Protective Services Act, Code of Alabama 1975, section 38-9-1, et seq.

2. Whether the individual or his representative has exhausted all reasonable efforts to obtain a return of the assets in the trust, including voiding the trust pursuant to Code of Alabama 1975, section 35-1-2 or section 8-9-12, or pursuing any other criminal or civil action available to recover the asset in the trust; and

3. Whether the individual was defrauded by the creation of the trust which is documented by a court action or an official police report; and

4. Whether the individual or his representative has exhausted all reasonable efforts to meet the individual's needs from other available sources, including the beneficiaries of the trust.

TN No. AL-95-17  Approval Date 07-31-95  Effective Date 07/01/95
Supersedes
TN No. NEW
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: Alabama

Citation Condition or Requirement

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:

- The methodology as described in SMM section 3598.
- Another cost-effective methodology as described below.

TN No. AL-91-36
Supersedes Approval Date 10-02-92 Effective Date 01-01-92
TN No. AL-90-30 HCFA ID: 7985E
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: ALABAMA

INCOME DETERMINATION UNDER SECTION 1902(r)(2) OF THE ACT ALLOWS USE OF MORE LIBERAL POLICIES FOR PREGNANT WOMEN, INFANTS AND CHILDREN ELIGIBLE UNDER SPECIFIED FEDERAL POVERTY LEVELS.

The following are more liberal income requirements for determining eligibility of individuals as pregnant women, infants and children under the federal poverty level.

Income will not be deemed from parents to pregnant women.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: ALABAMA

RESOURCE DETERMINATION UNDER SECTION 1902(r)(2) OF THE ACT AS AMENDED BY THE MCCA OF 1988 AND SECTION 1905(P) OF THE ACT INCLUDED BY THE TAX TECHNICAL AMENDMENT TO THE MCCA ALLOWS USE OF MORE LIBERAL POLICIES FOR QUALIFIED MEDICARE BENEFICIARIES.

The following are more liberal resource requirements than SSI for determining eligibility of individuals as Qualified Medicare Beneficiaries only.

The consideration of personal effects such as clothing, jewelry, furniture, etc., as a countable resource is waived.

The consideration of a life interest and/or remainder interest in real property is waived.

The required net annual income of 6 percent is waived for the excluded $6,000.00 in equity value in income-producing property essential to self-support.

Two automobiles may be excluded regardless of value.

Case value of life insurance policies with combined face value less than $2500 is excluded.

Burial exclusion is increased from $1500 to $2500.

Commingling of burial funds is allowed.

TN No. AL-91-27
Supersedes TN No. AL-90-30
Approval Date 8/6/91 Effective Date 07/01/91
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

ELIGIBILITY--UNDER SECTION 1931 OF THE ACT

X The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996 as follows:

All wages paid by the Census Bureau for temporary employment related to Census 2000 activities are excluded.

Federal and State tax refunds and refundable tax credits are excluded as income and resources for individuals eligible under 1931 authority.

X The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

Wages paid by the Census Bureau for temporary employments were budgeted as countable income.

Federal and state tax refunds and refundable tax credits were countable income and resources.

________________________________________________________________________

TN No. AL-10-004 Supersedes Approval Date 05-14-10 Effective Date 04/01/2010
TN No. AL-00-01
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE: ALABAMA


The following are more liberal resource requirements than SSI for determining eligibility of individuals eligible under the provisions of 42 CFR 435.211 and 435.231:

The required net annual income of six (6) percent is waived for the excluded $6,000.00 in equity value in income-producing property essential to self-support.

Two automobiles may be excluded regardless of value.

The consideration of a life estate interest and/or remainder interest in real property is waived.

Personal effects such as clothing, jewelry, furniture, etc., are excluded up to $4,000.

Case value of life insurance policies with combined face value less than $2500 is excluded.

Burial exclusion is increased from $1500 to $2500.

Commingling of burial funds is allowed.

TN No. AL-91-27
Supersedes TN No. AL-90-30
Approval Date 8/6/91
Effective Date 07/01/91
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

ELIGIBILITY UNDER SECTION 1925 OF THE ACT
TRANSITIONAL MEDICAL ASSISTANCE

The State covers low-income families and children for Transitional Medical Assistance (TMA) under section 1925 of the Social Security Act (the Act). This coverage is provided for families who no longer qualify under section 1931 of the Act due to increased earned income, or working hours, from the caretaker relative’s employment, or due to the loss of a time-limited earned income disregard. (*1902(a)(52), 1902(e)(1)(B), and 1925 of the Act*)

The amount, duration, and scope of services for this coverage are specified in Section 3.5 of this State plan.

For Medicaid eligibility to be extended through TMA, families must have been Medicaid eligible under section 1931 (months of retroactive eligibility may be used to meet this requirement):

____ X ___ During at least 3 of the 6 months immediately preceding the month in which the family became ineligible under section 1931.

____ For fewer than 3 of the 6 previous months immediately preceding the month in which the family became ineligible under section 1931. Specify:

The State extends Medicaid eligibility under TMA for an initial period of:

____ 6 months. For TMA eligibility to continue into a second 6-month extension period, the family must meet the reporting, technical, and income eligibility requirements specified at section 1925(b) of the Act.

____ X ___ 12 months. Section 1925(b) does not apply for a second 6-month extension period.

The State collects and reports participation information to the Department of Health and Human Services as required by section 1925(g) of the Act, in accordance with the format, timing, and frequency specified by the Secretary and makes such information publicly available.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

STATE Alabama

SECTION 1924 PROVISIONS

A. Income and resource eligibility policies used to determine eligibility for institutionalized individuals who have spouses living in the community are consistent with Section 1924.

B. In the determination of resource eligibility the State resource standard $12,000. Effective 10-1-89 thru 12-31-89.

- 12,516  Effective 1-1-90.
- 25,000  Effective 4-1-90.

C. The definition of undue hardship for purposes of determining if institutionalized spouses receive Medicaid in spite of having excess countable resources is described below:

Undue hardship exists when the Agency determines by clear and convincing evidence that the institutionalized spouse lacks the right, authority, or power to access the excess countable resources attributed to such spouse under §1924 (c)(2), and ineligibility for Medicaid benefits will result in non-receipt of necessary medical services.

In determining the existence of "undue hardship" Medicaid will consider all circumstances involving the situation of the individual, including but not limited to the following:

1. Whether the individual or his/her representative has exhausted all reasonable efforts to obtain and utilize the resources in question; or

2. Whether the individual or his/her representative has exhausted all reasonable efforts to meet his/her needs from all other available sources; or

3. Whether the individual has been determined to be a person in need of care and protection pursuant to the Adult Protective Services Act, Alabama Code (1975) §38-9-1, et seq.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

ELIGIBILITY CONDITIONS AND REQUIREMENTS

INCOME AND RESOURCE REQUIREMENTS FOR TUBERCULOSIS (TB) INFECTED INDIVIDUALS

For TB infected individuals under section 1902(z)(1) of the Act, the income and resource eligibility levels are as follows:

TN No. AL-96-05 Approval Date 3-19-96 Effective Date 01-01-96

persedes 93-16 No. AL-93-16
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State: Alabama

ELIGIBILITY UNDER SECTION 1931 OF THE ACT

The State covers low-income families and children under section 1931 of the act.

The following groups were included in the AFDC State Plan effect July 16, 1996:

- Pregnant women with no other eligible children.
- AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.
- In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, without modification.
- In determining eligibility for Medicaid, the agency uses the AFDC standards and methodologies in effect as of July 16, 1996, with the following modifications.
  - The agency applies lower income standards which are no lower than the AFDC standards in effect on May 1, 1988, as follows:
  - The agency applies higher income standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:
  - The agency applies higher resource standards than those in effect as of July 16, 1996, increased by no more than the percentage increases in the CPI-U since July 16, 1996, as follows:
  - The agency uses less restrictive income and/or resource methodologies than those in effect as of July 16, 1996, as follows:
    - All resources are excluded
    - All applicants and recipients with earnings will receive the earned income disregard of $30 and a 1/3 of the remainder for 12 consecutive months
    - Net income for self-employment and farming will be calculated using Schedule C and Schedule F respectively

TN No. AL-03-05
Supersedes TN No. AL-97-05
Approval Date 9/29/2003 Effective Date 08/01/2003
- Disregard $1 for all applicants and recipients

**X** The income and/or resource methodologies that the less restrictive methodologies replace are as follows:

- Exclusion of one vehicle per licensed driver
- $1,000 disregard of the equity value of countable resources with a $1,000 resource limit
- The $30 and 1/3 of the remainder earned income disregard for 4 months and the $30 disregard for 8 months is applicable for certain applicants and recipients with earnings
- Use the farm income report or 45% of the gross income as a standard expense figure to determine net income exception use 2 cent per pound for net income from broilers and use the itemized expense method in determining net income
- Income limit for eligibility was less than the Medicaid Standard

The agency terminates medical assistance (except for certain pregnant women and children) for individuals who fail to meet TANF work requirements.

The agency continues to apply the following waivers of provisions of Part A of Title IV in effect as of July 16, 1996, or submitted prior to August 22, 1996, and approved by the Secretary on or before July 1, 1997.

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**TN No. AL-03-05**
Supersedes **TN No. AL-97-05**

**Approval Date** 9/29/2003  
**Effective Date** 08/01/2003
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

ASSET VERIFICATION SYSTEM

1940(a) of the Act 1. The agency will provide for the verification of assets for purposes of determining or redetermining Medicaid eligibility for aged, blind and disabled Medicaid applicants and recipients using an Asset Verification System (AVS) that meets the following minimum requirements.

A. The request and response system must be electronic:

   (1) Verification inquiries must be sent electronically via the internet or similar means from the agency to the financial institution (FI).

   (2) The system cannot be based on mailing paper-based requests.

   (3) The system must have the capability to accept responses electronically.

B. The system must be secure, based on a recognized industry standard of security (e.g., as defined by the U.S. Commerce Department’s National Institute of Standards and Technology, or NIST).

C. The system must establish and maintain a database of FIs that participate in the agency’s AVS.

D. Verification requests also must be sent to FIs other than those identified by applicants and recipients, based on some logic such as geographic proximity to the applicant’s home address, or other reasonable factors whenever the agency determines that such requests are needed to determine or redetermine the individual’s eligibility.

E. The verification requests must include a request for information on both open and closed accounts, going back up to 5 years as determined by the State.

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TN No.: AL 13-004 Approval Date: 05-28-13 Effective Date: April 1, 2013
Supersedes
TN No.: New
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

ASSET VERIFICATION SYSTEM

2. System Development

   A. The agency itself will develop an AVS.

      In 3 below, provide any additional information the agency wants to include.

   X B. The agency will hire a contractor to develop an AVS.

      In 3 below provide any additional information the agency wants to include.

   C. The agency will be joining a consortium to develop an AVS.

      In 3 below, identify the States participating in the consortium. Also, provide any other information the agency wants to include pertaining to how the consortium will implement the AVS requirements.

   D. The agency already has a system in place that meets the requirements for an acceptable AVS.

      In 3 below, describe how the existing system meets the requirements in Section 1.

   E. Other alternative not included in A. – D. above.

      In 3 below, describe this alternative approach and how it will meet the requirements in Section 1.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

ASSET VERIFICATION SYSTEM

3. Provide the AVS implementation information requested for the implementation approach checked in Section 2, and any other information the agency may want to include.

In order to implement the requirements of an Asset Verification System (AVS), the Alabama Medicaid Agency will select a contractor through the Request for Information (RFI) process. The contractor will have the capacity, requisite experience and expertise to provide the AVS services for the state of Alabama, in accordance with the provisions and requirements set forth in Section 1040 of P.L. 110-252. The contractor will ensure the quality of services provided, take necessary steps to make any corrections noted timely and will meet or exceed specific and measurable performance standards as outlined in the RFI. The system will comply with the national standards prescribed by the Health Insurance Portability and Accountability Act of 1996 and the Balanced Budget Act of 1997 and will be kept in compliance with new and modified requirements.

Alabama will prepare and issue an RFI in July 2013 for the purpose of identifying qualified vendors and gaining an understanding of the cost and system changes that will be necessary to implement in AVS.
STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ALABAMA

DISQUALIFICATION FOR LONG-TERM CARE ASSISTANCE FOR INDIVIDUALS WITH
SUBSTANTIAL HOME EQUITY

1917(f) The State agency denies reimbursement for nursing facility services and other
long-term care services covered under the State plan for an individual who does
not have a spouse, child under 21 or adult disabled child residing in the
individual’s home, when the individual’s equity interest in the home exceeds the
following amount:

   X $500,000 (increased by the annual percentage increase in the urban
   component of the consumer price index beginning with 2011,
   rounded to the nearest $1,000).

   An amount that exceeds $500,000 but does not exceed $750,000
   (increased by the annual percentage increase in the urban component of
   the consumer price index beginning with 2011, rounded to the nearest
   $1,000).

The amount chosen by the State is

   ______ This higher standard applies statewide.

   ______ This higher standard does not apply statewide. It only
   applies in the following areas of the State:

   ______ This higher standard applies to all eligibility groups.

   ______ This higher standard only applies to the following eligibility groups:

The State has a process under which this limitation will be waived in cases of
undue hardship.

TN No. 06-006
Supersedes Approval Date: 01/24/07 Effective Date: 12/01/06
TN No. New