

9.2 MEDICAID ELIGIBILITY DETERMINATION GROUPS

The Medicaid AG is composed of the individual(s) who meets the eligibility requirements for coverage under a specific Medicaid coverage group. However, the income of the AG does not determine financial eligibility for all coverage groups. Some coverage groups require the determination of an Income Group to determine countable income and a Needs Group for comparison to the appropriate needs standard to determine financial eligibility. The case in which the AG member(s) receives coverage may be composed of eligible AG members of one or more coverage groups.

The criteria for all of these groups is found in this Chapter.