

TN - Submission Package - TN2020MS0002O - (TN-21-0010) - Eligibility

Summary Reviewable Units Versions Correspondence Log Approval Letter News **Related Actions**

CMS-10434 OMB 0938-1188

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Working Individuals under 1619(b)

MEDICAID | Medicaid State Plan | Eligibility | TN2020MS0002O | TN-21-0010

Individuals who have blindness or a disability who participated in Medicaid as SSI beneficiaries or who were considered to be receiving SSI, who would still qualify for SSI except for earnings.

Package Header

Package ID	TN2020MS0002O	SPA ID	TN-21-0010
Submission Type	Official	Initial Submission Date	12/29/2021
Approval Date	3/23/2022	Effective Date	10/1/2021
Superseded SPA ID	TN 92-6		
	User-Entered		

The state covers the working individuals under 1619(b) mandatory eligibility group in accordance with the following provisions:

A. Characteristics

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

- In the month preceding the month of qualification under this group:
 - Received SSI or state supplement; and
 - Were eligible for Medicaid under the state plan.
- Continue to have blindness or a disability.
- Continue to meet all non-disability-related requirements for eligibility for SSI or state supplement.
- Would qualify for SSI or State Supplement, except for earned income.
- For whom the loss of eligibility for Medicaid would seriously inhibit the individual's ability to continue or obtain employment.
- For whom the individual's earnings are not sufficient to provide a reasonable equivalent of SSI (including state supplement), Medicaid, and publicly funded attendant care services.

Working Individuals under 1619(b)

MEDICAID | Medicaid State Plan | Eligibility | TN2020MS00020 | TN-21-0010

Package Header

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B. Additional Information (optional)

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