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## **Medical Assistance Eligibility Policy Manual (Archive) - Part 3 of 3**

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Effective Until 12/21/2018

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## Introduction



### Medical Assistance Eligibility Policy Manual

Need help? Call 855-HEA-PLUS (855-432-7587).

Para recibir ayuda con la póliza en Español, por favor contacte Asistencia del Cliente al 855-HEA-PLUS (855-432-7587).

Visit [Health-e-Arizona Plus](#) for more information and to manage your benefits online.

Last Updated: 12/17/2018

## Getting Started

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### Getting Started

Welcome to Arizona's Medical Assistance Eligibility Policy Manual.

View the [Quick Start](#) page for basic instructions.

View the [Navigating This Manual](#) page for additional instructions and tips.

### Quick Start

To get to a specific policy manual section use the Table of Contents to the left and open the policy section followed by the appropriate chapter.

Example: To get to “Chapter 101 - What is AHCCCS Medical Assistance?” you would need to:

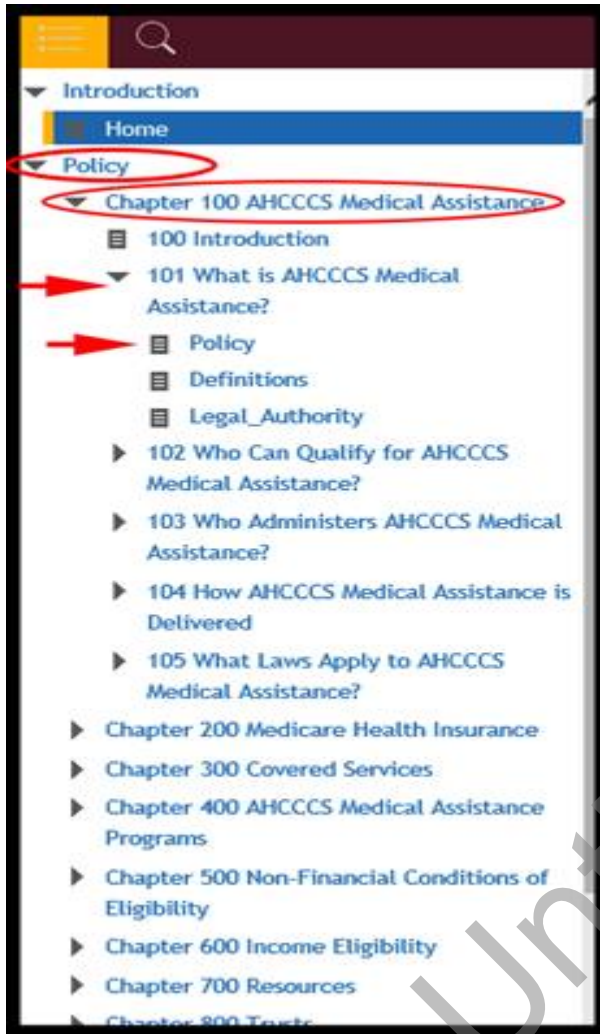
Click on policy

Click on Chapter 100 - Introduction

Click to open subchapter 101 - What is Medical Assistance

Click on subsections>> Policy>> Definitions>> Legal Authority...

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For more instructions on navigating this manual, click on the topic "Navigating This Manual" from the Table of Contents on the left.

### **Navigating this manual**

The window of the Arizona's Medical Assistance Eligibility Policy Manual is divided into three panels: top, left and right.

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Medical Assistance Eligibility Policy Manual

Top Tool bar

Left Panel

Right Panel

Home > Policy > Chapter 100 AHCCCS Medical Assistance > 101 What is AHCCCS Medical Assistance? > Policy

## 101 What is AHCCCS Medical Assistance?

Revised 10/01/2015

**Policy**

The Arizona Health Care Cost Containment System (AHCCCS) Medical Assistance was established by the State of Arizona. AHCCCS Medical Assistance provides health care for eligible Arizona residents.

AHCCCS administers Arizona's three main health insurance programs:

- Medicaid;
- KidsCare; and
- Medicare Savings Program (MSP).

For a list of Arizona's Medicaid, CHIP and MSP programs, see Chapter 400 - [AHCCCS Medical Assistance Programs](#).

**Definitions**

Term	Definition
Medicaid	A jointly funded, Federal-State health insurance program. Medicaid provides medical assistance for certain low-income and needy persons.
KidsCare	Arizona's Children's Health Insurance Program (CHIP). This program is for low-income, uninsured children under age 19.
Medicare Savings Program (MSP)	Provides help with Medicare expenses for customers entitled to Medicare Part A.

**Legal Authority**

This requirement applies to the following program:

The top panel of the manual contains the following icons:

Table of Contents

Search button

Print button

Scroll buttons

Search Box

The left panel of the manual contains the table of contents and the search button.

The right panel is the main display window for the eligibility policy manual.



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The screenshot shows a web page with a breadcrumb trail: Home > Policy > Chapter 100 AHCCCS Medical Assistance > 101 What is AHCCCS Medical Assistance?. The page title is '101 What is AHCCCS Medical Assistance?' and it was revised on 10/01/2018. The page is divided into sections: Policy, Definitions, and a Table of Contents. The Policy section explains that AHCCCS Medical Assistance was established by the State of Arizona and provides health care for eligible residents. It also states that AHCCCS administers three main health insurance programs: Medicare, Medicaid, and the Savings Program (MSP). The Definitions section includes a table with two columns: Term and Definition. The Table of Contents section has a 'Go to top' navigation arrow. A secondary navigation bar is located at the top of the page content. A table of contents button is located on the left side of the page. A cursor arrow points to the 'Go to top' navigation arrow.

Home > Policy > Chapter 100 AHCCCS Medical Assistance > 101 What is AHCCCS Medical Assistance?

## 101 What is AHCCCS Medical Assistance?

Revised 10/01/2018

### Policy

The Arizona Health Care Cost Containment System (AHCCCS) Medical Assistance was established by the State of Arizona. AHCCCS Medical Assistance provides health care for eligible Arizona residents.

AHCCCS administers Arizona's three main health insurance programs:

- Medicare
- Medicaid
- Savings Program (MSP).

For a list of Arizona's Medicaid, CHIP and MSP programs, see Chapter 400 - [AHCCCS Medical Assistance Programs](#).

### Definitions

Term	Definition
Medicaid	A jointly funded, Federal-State health insurance program. Medicaid provides medical assistance to low-income and needy persons.
KidsCare	Arizona's Children's Health Insurance Program (CHIP). This program provides health insurance for children who are not eligible for Medicaid.

Go to top" navigation arrow.

The expand and collapse button allows the user to hide or open the table of contents. This page also provides a secondary navigation at the top of the page.

At the bottom of the page there is a cursor arrow to navigate to the top of the page

### Table of Contents

The Table of Contents can be accessed by clicking the "Contents" button, if it's not already displayed. It is organized into three levels. The first two levels are "books" and the third level contains "pages". Books organize content by chapters (1st level) and subchapters/topics (2nd level), while pages contain the actual policy. Clicking on a book will load the pages related to that section of the chapter.

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## Search

The search option allows you to find all policy sections that contain a word or phrase. You can use the search button on the left of the screen of the search box. Type the word or phrase you are looking for in the Search field and click enter. (When you start typing a word or topic, a set of suggestions will start appearing and you may not have to enter the full search string).

The screenshot shows a search interface for the Medical Assistance Eligibility Policy Manual. The search term 'STT' is entered in the top right. The left sidebar displays search results, with the top result 'E Special Treatment Trusts and ALTCS Eligibility' selected. The main content area shows the policy text for 'Special Treatment Trusts (STT)', including a list of three types: Trusts for Individuals Under Age 65 with a Disability, Income-Only Trusts, and Pooled Trusts. A table below lists conditions for qualification, such as the date of creation (on or after August 11, 1993) and the designation of AHCCCS as a remainder beneficiary.

**Medical Assistance Eligibility Policy Manual**

STT

7 result(s) found for STT

**E Special Treatment Trusts and ALTCS Eligibility**  
 E Special Treatment Trusts and ALTCS Eligibility Revised 08/24/2018 ...  
 Policy > Chapter 800 Trusts > 800 Special Treatment Trusts

**I Assets Placed in a Trust**  
 I Assets Placed in a Trust Policy When a counted resource or home property is placed in a trust ...  
 Policy > Chapter 800 Transfers > 800 Transfers that may Affect Eligibility

**A Special Treatment Trust Overview**  
 A Special Treatment Trust Overview Revised 08/24/2018 Policy Special ...  
 Policy > Chapter 800 Trusts > 800 Special Treatment Trusts

**801 Trust Overview**  
 801 Trust Overview Policy A trust is a legal arrangement in which a person or organization, li ...  
 Policy > Chapter 800 Trusts

**802 Non-Special Treatment Trusts**  
 802 Non-Special Treatment Trusts Revised 09/14/2018 Policy Trusts ...  
 Policy > Chapter 800 Trusts

**B Trusts for Individuals Under Age 65 with a Disability**  
 B Trusts for Individuals Under Age 65 with a Disability Revised 08/24/20 ...  
 Policy > Chapter 800 Trusts > 800 Special Treatment Trusts

**D Pooled Trusts**  
 D Pooled Trusts Revised 08/24/2018 Policy In addition to the conditi ...  
 Policy > Chapter 800 Trusts > 800 Special Treatment Trusts

**Policy**

Special Treatment Trusts (STT) may allow people who would not otherwise qualify due to excess resources or income to become eligible for ALTCS. The assets in a STT are not counted for the income and resource tests. In return, AHCCCS is authorized to recover the cost of these benefits from the trust upon the death of the customer or termination of the trust.

There are three types of STT:

- Trusts for Individuals Under Age 65 with a Disability
- Income-Only Trusts; and
- Pooled Trusts.

The trust must meet certain conditions to qualify as a STT. Many of these conditions apply to all three STT types, and some are unique to a specific kind of STT. Failure to meet these conditions disqualifies the trust from special treatment. All STTs are reviewed by AHCCCS to ensure that they meet all conditions for special treatment.

The conditions that apply to all three STT types are listed in the table below:

Condition	Description
Date of creation	The trust must be created on or after August 11, 1993.  NOTE: A trust created before August 11, 1993 must be dissolved and recreated to qualify as a STT.
Customer as beneficiary	The customer must be designated as the beneficiary of the trust.
AHCCCS as remainder beneficiary	<ul style="list-style-type: none"> <li>• Irrevocable trusts must name AHCCCS as the remainder beneficiary upon the death of the customer.</li> <li>• Revocable trusts must name AHCCCS as the remainder beneficiary upon the trust being revoked or terminated, or upon the death of the customer.</li> </ul>

The results of the search is displayed below the seach box. A ranking system displays the most relevant sections first. Click on the title of results you want to look at and the manual section will open in the right panel. Your search term will be highlighted wherever it appears on the page.

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## **Cash Assistance and Nutrition Assistance Policy**

Please see the Cash and Nutrition Assistance Policy Manual located at  
<https://DBMEFAAPolicy.azdes.gov> for policy and procedures.

Effective Until 12/21/2018

# Revisions

## Revision History

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### Revision History and Archives

This page provides a summary of changes that have been made to this manual. Entries are added according to the date they were published. At the end of each entry you will find a link to a PDF file that archives the policy as it existed prior to the revision.

**Revision Date: 12/14/2018**

#### **MA 1707- The Eligibility Hearing [Sections A; B; C ]**

- The Timeframes subsection under section A and C is updated for clarity.
- Updated the table on scheduling and holding the hearing.
- Updated manual references and links

#### **MA 1709 – Disability Reconsideration Requests**

- Updated language for clarity
- Updated the section Eligibility Office Responsibilities with updated names of offices.
- Updated manual references and links

#### **MA 602 - Budget Groups Income (Section D)**

- Removed reference to FPEP. Program no longer exists.

#### **MA 1402 Proof needed at Renewal**

- Removed reference to FPEP. Program no longer exists.

#### **For prior versions of the manual use these links**

[Part 1](#) (Chapters 100 through 900) | [Part 2](#) (Chapters 1000 through 1900) | [Part 3](#)  
(Examples and Revisions)

**Revision Date: 12/07/2018**

#### **MA 1801 Fraud and Abuse**

- Updated manual references and links.

**For prior versions of the manual use these links**

[Part 1](#) (Chapters 100 through 900) | [Part 2](#) (Chapters 1000 through 1900) | [Part 3](#)  
(Examples and Revisions)

**Revision Date: 11/29/2018**

**MA 905 Transfer Penalty Period**

- Updated Private Pay Rates table.

**MA 1201C Share of Cost (SOC) Deductions**

- Updated Standard Utility Allowance tables

**MA 1303 ALTCS Application Process**

- Removed subsections and moved the information specific to the ALTCS application process as numbered list to the main policy section.
- Updated language for clarity and revised chapter to meet standard terminology
- Added definitions and legal authorities

**MA 1304 SSI-MAO Application Process [ A; B ]**

- Updated language for clarity and revised the whole chapter to meet standard terminology
- Added definitions and legal authorities

**MA 1305 Medicare Savings Program (MSP) Application Process**

- Updated policy to include information on when a customer can qualify for SLMB or QI-1 even if they do not have Medicare Part B
- Updated formatting, manual references and links.

**MA 1401 General Information about Renewals [ A; B; and C]**

- Updated policy on the Renewal Process for all programs, for both “No Response Required renewals” and “Response Required renewals”
- Updated language for clarity
- Updated definitions and legal authorities

**MA 1402 Proof Needed at Renewal**

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- Updated language on the requirements for Non-Citizen status.
- Updated formatting, manual references and links.

**MA 1601 Language Interpretation and Translation**

- Updated language for clarity
- Updated formatting, manual references and links.

**MA 1602 Confidentiality [ A; B; and C ]**

- Updated language on Additional Protections for certain medical information in 1602C
- Updated formatting, manual references and links.

**MA 1703 Pre-Hearing Discussion**

- Updated language for clarity

**For prior versions of the manual use these links**

[Part 1](#) (Chapters 100 through 900) | [Part 2](#) (Chapters 1000 through 1900) | [Part 3](#) (Examples and Revisions)

**Revision Date: 11/16/2018**

**MA 607 Expenses Exceed Income**

- Updated language for clarity
- Updated links to new examples

**MA 614 How to Calculate Income Eligibility Using MAGI**

- Updated language for clarity
- Updated links to new examples

**MA 1004 Developmentally Disabled Status**

- Updated language for clarity

**MA1302 Special Procedures for Certain Applicants [ A; B; C; D; E ]**

- Updated language for clarity and revised chapter to meet standard terminology
- Added definitions and legal authorities in MA1302A.

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- “Proof” subsections removed in MA1302C and MA1302E.
- Added definitions in MA1302D.

**MA1604 Written Letters**

- Updated language and formatting to improve clarity on Written Letters policy.

**Revisions Prior to 11/16/2018**

For version history of this manual prior to 11/16/2018, please submit a request to [EligibilityPolicyManual@azahcccs.gov](mailto:EligibilityPolicyManual@azahcccs.gov).

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