

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

OPTIONAL CATEGORICALLY NEEDY GROUPS WITH INCOMES  
RELATED TO THE SUPPLEMENTAL SECURITY INCOME (SSI)  
FEDERAL BENEFIT RATE

1. Individuals in institutions who are eligible under a special income level

(42 CFR 435.231) (*I think this is 42 CFR 435.236*) (*231 is no longer in CFR by 1999*)  
*435.1008 & 1009*

X The State allows eligibility for individuals with income that does not exceed 300 percent of the SSI Federal benefit rate.

\_\_\_\_\_ The State has elected to allow eligibility for individuals with income at an amount lower than 300 percent of the SSI Federal benefit rate.

Effective Date: Amount

\_\_\_\_\_ \$ \_\_\_\_\_

STATE	<i>Oklahoma</i>	
DATE REC'D	JAN 29 1992	
DATE APPV'D	MAR - 3 1992	
DATE EFF	OCT - 1 1991	
HCFA 174	<i>92-02</i>	A

New 10-01-91

TN NO. 92-02  
Supersedes  
TN No. New Page

Approval Date MAR - 3 1992 Effective Date: OCT - 1 1991

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

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)(1) of the Act are as follows:

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

<u>Family Size</u>	<u>Income Level</u>
1	\$ _____ *
2	\$ _____ *
3	\$ _____ *
4	\$ _____ *
5	\$ _____ *

(\*as published annually)

STATE <u>Oklahoma</u>	A
DATE REC'D <u>12-22-00</u>	
DATE APPV'D <u>3-22-01</u>	
DATE EFF <u>11-01-00</u>	
HCFA 179 <u>00-18</u>	

Revised 11-01-00

TN# 00-18 Approval Date 3/22/01 Effective Date 11/01/00  
Supersedes  
TN # 92-02

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

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:

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

Eff. Jan 1, 1989:  85 percent  90 percent (no more than 100)

Eff. Jan 1, 1990:  90 percent  \_\_\_percent (no more than 100)

Eff. Jan 1, 1991: 100 percent

Eff. Jan 1, 1992: 100 percent

b. Levels:

\*

CA. QUALIFIED DISABLED WORKING INDIVIDUALS WITH INCOMES RELATED TO FEDERAL POVERTY LEVEL

As of July 1990, the levels for determining income eligibility for groups of qualified disabled working individuals under the provisions of section 1905(s) of the Act are 200% of federal poverty level.

\*

STATE <u>Okla. homa</u>	A
DATE REC'D <u>MAY 26 1995</u>	
DATE APP'VD <u>AUG 24 1995</u>	
DATE EFF <u>APR 01 1995</u>	
HCFA 179 <u>95-10</u>	

Revised 04-01-95

TN No. 95-10  
Supersedes 94-04 Approval Date AUG 24 1995 Effective Date APR 01 1995  
TN No. 94-04

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

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.

(1) Family Size	(2) Net income level protected for maintenance for <u>one</u> month	(3) Amount by which Column (2) exceeds limits specified in 42 CFR	(4) Net income level for persons living in rural areas for ___ months	(5) Amount by which Column (4) exceeds limits specified in 42 CFR
<input type="checkbox"/> urban only		435.1007*		435.1007*

urban & rural

1	\$	\$	\$	\$
2	\$	\$	\$	\$
3	\$	\$	\$	\$
4	\$	\$	\$	\$

For each additional person, add:

\$	\$	\$	\$
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\*The agency has methods for excluding from its claim for FFP payments made on behalf of individuals whose income exceeds these limits.

STATE <u>Oklahoma</u>	A
DATE REC'D <u>3-26-03</u>	
DATE APPV'D <u>6-17-03</u>	
DATE EFF <u>2-1-03</u>	
HCFA 179 <u>OK 03-07</u>	

SUPERSEDES: TN- 95-16

Revised 02-01-03

TN# 03-07 Approval Date 6-17-03 Effective Date 2-1-03  
Supersedes  
TN# 95-16

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: OKLAHOMA

INCOME LEVELS (Continued)

D. MEDICALLY NEEDY

(1)	(2)	(3)	(4)	(5)
Family Size	Net income level protected for maintenance for <u>one</u> month	Amount by which Column (2) exceeds limits specified in 42 CFR 435.1007*	Net income level for persons living in rural areas for ___ months	Amount by which Column (4) exceeds limits specified in 42 CFR 435.1007*
	___ urban only			
	___ urban & rural			
5	\$	\$	\$	\$
6	\$	\$	\$	\$
7	\$	\$	\$	\$
8	\$	\$	\$	\$
9	\$	\$	\$	\$
10	\$	\$	\$	\$
For each additional person, add: \$ 50.00				

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

SUPERSEDES: TN- 95-16

STATE <u>OKlahoma</u>	A
DATE REC'D <u>3-26-03</u>	
DATE APPV'D <u>6-17-03</u>	
DATE EFF <u>2-1-03</u>	
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