Revision:	HCFA-PM-91- 4 AUGUST 1991	(BPD)	SUPPLEMENT 2 TO ATTA Page 6 OMB No.: 0938-	CHMENT 2.6-A		
	STATE PLAN U	NDER TITLE XIX OF	F THE SOCIAL SECURITY A	CT		
;	State:	AI.ASKA	•			
4. <u>Age</u>	d and Disabled	Individuals				
二	Same as SSI	resource levels				
	More restric	tive than SSI le	vels and are as follow	s :		
	Family Size Resource Level					
	1					
	2					
	3					
	4					
	5					
	Same as medica	cally needy resc ally needy progra	ource levels (applicabl m)	e only if State		
TN No 2	11-13	,				
Supersedes	Approv	al Date 4/10	Effective Date	10/1/91		

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		STATE PLAN	UNDER TITL	E XIX OF THE SOCIAL SECURITY ACT
		State:	ALASKA	
			RESOURCE	LEVELS (Continued)
В.	MEDICA	LLY NEEDY		
	Applic	able to all g	roups -	
		Except those of the Act.	specified h	below under the provisions of section 1902
		Family Siz	:e	Resource Level
		1		
		_2		
		3		
		4		
		5		
		6		
		8		
		_10		
	For e	ach additiona	l person	
	No. ersede No.	91-13 Appr	oval Date _	4/10/92 Effective Date /0/1/91

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