

28.9 ELIGIBILITY DETERMINATION GROUPS**A. THE ASSISTANCE GROUP (AG)****1. Who Must Be Included**

The individual who qualifies for Special Pharmacy services is the only person in the AG.

2. Who Cannot Be Included

The following individuals cannot be included.

- Recipients of any full-coverage Medicaid group **or QMB coverage group.**
- Any other person except the person who qualifies for antirejection **/antipsychotic** drugs.

B. THE INCOME GROUP (IG)

The Income Group includes:

- **The legal** spouse of the Special Pharmacy applicant, if living in the home
- All dependent children of the Special Pharmacy applicant who lives in the home. See Section 15.2 for the definition of a dependent child.

C. THE NEEDS GROUP (NG)

The income **limit** for the number of persons in the Income Group is used.