§ 369-m. Program eligibility and operations. 1. In accordance with regulations of the commissioner, a social services district shall pay all or part of the health insurance costs on behalf of a person with AIDS who:

(a) is unemployed, or, if employed, currently is ineligible to participate in health insurance through his or her current employer or such employer offers no such plan; and

(b) participated in the plan of health insurance provided by his or her prior employer and is eligible to continue or convert his or her participation in such plan by assuming the health insurance costs associated with such plan although no longer employed by such employer; and

(c) resides in a household whose household income is less than or equal to one hundred eighty-five percent of the poverty line.

2. For purposes of determining eligibility under this title, household income shall be determined by use of the same methodology used to determine eligibility for federal supplemental security income benefits, provided that costs incurred for medical or remedial care shall not be taken into account in determining household income; and, provided further, that any resources available to such household shall not be considered nor required to be applied to the payment of health care expenses.