



Region 10
2201 Sixth Avenue, MS/RX 43
Seattle, Washington 98121

OCT 25 2010

Bruce Goldberg, MD, Director
Department of Human Services
Human Services Building
500 Summer Street Northeast, E-15
Salem, Oregon 97301-1097

RE: State Plan Amendment (SPA) Transmittal Number (TN) 10-016

Dear Dr. Goldberg:

The Centers for Medicare & Medicaid Services' (CMS) Seattle Regional Office has completed its review of State Plan Amendment (SPA) Transmittal Number 10-016. This amendment implements the Express Lane Eligibility (ELE) option under Medicaid, per Section 203 of Children's Health Insurance Reauthorization Act of 2009 (CHIPRA). The State will use the Supplemental Nutritional Assistance Program (SNAP) and the National School Lunch Program (NSLP) as Express Lane agencies to conduct simplified eligibility determinations and expedited enrollment of eligible children under age 19 in Medicaid.

This SPA is approved effective August 1, 2010.

If you have any additional questions or require any further assistance, please contact me, or have your staff contact Janice Adams at (206) 615-2541 or via email at janice.adams@cms.hhs.gov.

Sincerely,

Barbara K. Richards
Associate Regional Administrator
Division of Medicaid and Children's Health
Operations

cc:

Judy Mohr Peterson, Administrator, Office of Medical Assistance Programs
Sandy Hansen, State Plan Coordinator, Office of Medical Assistance Programs
Jesse Anderson, State Plan Manager, Office of Medical Assistance Programs

**TRANSMITTAL AND NOTICE OF APPROVAL OF
STATE PLAN MATERIAL**

1. TRANSMITTAL NUMBER:
10-16

2. STATE
Oregon

FOR: HEALTH CARE FINANCING ADMINISTRATION

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE
SOCIAL SECURITY ACT (MEDICAID) Medical Assistance

TO: REGIONAL ADMINISTRATOR
HEALTH CARE FINANCING ADMINISTRATION
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE
8/1/10

5. TYPE OF PLAN MATERIAL (Check One):

- NEW STATE PLAN AMENDMENT TO BE CONSIDERED AS NEW PLAN AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:
1902(e)(13) of the Act

7. FEDERAL BUDGET IMPACT:
a. 2010 \$ (10,000)
b. 2011 \$ (783,000)

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

**Section 2.1, page 11a, 11b, 11c & 11d (P&I)
pages 11b, 11c, 11d, 11e, 11f, 11g (P&I)**

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION
OR ATTACHMENT (If Applicable):

10. SUBJECT OF AMENDMENT: This transmittal is being submitted to add SNAP ~~as an express lane agency~~ and selected
Department of Education, National School Lunch programs as an express lane agency. (P+I)

11. GOVERNOR'S REVIEW (Check One):

- GOVERNOR'S OFFICE REPORTED NO COMMENT OTHER, AS SPECIFIED:
 COMMENTS OF GOVERNOR'S OFFICE ENCLOSED
 NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

12. SIGNATURE OF STATE AGENCY OFFICIAL 

16. RETURN TO:
Division of Medical Assistance Programs
Department of Human Services
500 Summer Street NE E-35
Salem, OR 97301

13. TYPED NAME **Judy Mohr Peterson**  **Bruce Goldberg, MD**

14. TITLE: **Administrator, DMAP**  **Director, DHS**

15. DATE SUBMITTED: **8-9-10**

ATTN: Jesse Anderson, State Plan Manager

FOR REGIONAL OFFICE USE ONLY

17. DATE RECEIVED: **AUGUST 9 2010**

18. DATE APPROVED: **OCT 25 2010**

PLAN APPROVED - ONE COPY ATTACHED

19. EFFECTIVE DATE OF APPROVED MATERIAL: **AUG 01 2010**

20. SIGNATURE OF REGIONAL OFFICIAL: 

21. TYPED NAME: **Barbara K. Richards**

22. TITLE: **Associate Regional Administrator**

23. REMARKS:

**Division of Medicaid &
Children's Health**

**9/15/2010 State authorized pen and ink changes.
10/19/10 - Pen & Ink changes authorized by the state.**

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
Medical Assistance Program

State/Territory: OREGON

SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s) _____

2.1 Application, Determination of Eligibility and Furnishing Medicaid

1902(e)(13) of
the Act

(e) Express Lane Option. The Medicaid State agency elects the option to rely on a finding from an Express Lane agency when determining whether a child satisfies one or more components of Medicaid eligibility. The Medicaid State agency agrees to meet all of the Federal statutory and regulatory requirements for this option. This authority may not apply to eligibility determinations made before February 4, 2009 or after September 30, 2013.

- (1) The Express Lane option is applied to:
 - Initial determinations Redeterminations
 - Both
- (2) A child is defined as younger than age:
 - 19 20 21
- (3) The following public agencies are approved by the Medicaid State agency as Express Lane agencies:

The Supplemental Nutritional Assistance Program (SNAP) and selected Department of Education, National School Lunch Program (NSLP).

TN No. 10-16
Supersedes TN No. _____

Approval Date: **OCT 25 2010**

Effective Date: 8/1/10

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
 Medical Assistance Program

State/Territory: Oregon

SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s)

2.1 Application, Determination of Eligibility and Furnishing Medicaid (Cont)

(4) The following component/components of Medicaid eligibility are determined under the Express Lane option. Also, specify any differences in budget unit, deeming, income exclusions, income disregards, or other methodology between Medicaid eligibility determinations for such children and the determination under the Express Lane option.

SNAP:

The state will use SNAP income findings and apply this income to the child who is applying for medical. The state will use SNAP findings on verification of SSN and state residency. The state will then verify citizenship.

The state allows a child support income disregard of \$50 per child, up to \$200 for a family for medical eligibility determinations. Additionally, the state allows the federal earned income disregard of \$33. These disregards do not apply to SNAP.

The state considers money from an assistance program withheld to repay an overpayment as available income in determining medical eligibility. SNAP excludes this income.

The state excludes the portion of a payment from the TANF program that is counted as disqualifying income in determining medical eligibility. SNAP does not exclude this income.

The state counts periodic income in the month it is received when determining eligibility for medical programs. SNAP gives clients the choice of either averaging the income over the applicable time period or to have the income counted in the month it is expected to be received.

For medical program determination, the state excludes the first \$30 of lump-sum income received by each family member each quarter. The state counts the amount that exceeds \$30 a quarter as countable income. SNAP excludes lump-sum income.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Medical Assistance Program

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SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s)

2.1 Application, Determination of Eligibility and Furnishing Medicaid (Cont)

(4) (Continued)

For medical program determination, the state excludes the portion of adoption assistance that is for the special needs of a child. SNAP does not exclude the income.

Cash medical support is excluded by the state for medical program determination. SNAP counts the amount of cash medical support not used to reimburse an actual medical cost.

The state excludes the amount of charitable contributions used to assist with a client's medical expenses for medical eligibility determinations. SNAP counts charitable contributions that exceed \$300 a quarter.

In determining eligibility for medical, the state excludes the earned income of children up to age 19. SNAP counts the earned income of individuals age 18 and over.

Filing groups differ between SNAP and Medicaid/CHIP. For SNAP, filing groups may include anyone living in the same home who purchases and prepares food together. For Medicaid/CHIP, there must be specific relations (blood relationships/marriage).

THE NATIONAL SCHOOL LUNCH PROGRAM (NSLP):

The state will use the NSLP income findings and apply this income to the child who is applying for medical. The state will also use the NSLP findings for eligibility group size and residency. The state will then verify SSN and citizenship.

The state allows a child support income disregard of \$50 per child, up to \$200 for a family for medical eligibility determinations. Additionally, the state allows the federal earned income disregard of \$33. These disregards do not apply to the NSLP.

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Medical Assistance Program

State/Territory: OREGON

SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s)

2.1 Application, Determination of Eligibility and Furnishing Medicaid (Cont)

(4) (Continued)

Cash medical support is excluded by the state for medical program determination. NSLP counts Cash medical support.

The state counts periodic income in the month it is received when determining eligibility for medical programs. NSLP does not count this income.

For medical program determination, the state excludes the first \$30 of lump-sum income received and counts the rest. NSLP does not count lump-sum income.

The state excludes the amount of charitable contributions used to assist with a client's medical expenses for medical eligibility determinations. NSLP counts charitable contributions.

In determining eligibility for medical, the state excludes the earned income of children up to age 19. NSLP counts this income.

The state excludes adoption assistance, while NSLP counts this income.

The state excludes the income of household members who are not related to children. NSLP counts the income of all household members.

The state excludes the income of relatives who are not required to be in the eligibility group. NSLP counts the income of all household members.

The state counts the income of eligibility group members who are in the military and away only because they are deployed. NSLP counts only the income the service people send home.

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SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s)

2.1 Application, Determination of Eligibility and Furnishing Medicaid (Cont)

(4) (Continued)

The state uses income from the two months prior to the application and divides it by two to calculate income. NSLP uses annual income unless it is not representative. In that case, the income is anticipated.

The state considers a child to live in the household where the child spends over 50 percent of the time when parents share custody of children. NSLP allows children to receive benefits in both households in shared custody situations.

The state forms eligibility groups based on relationships of household members. NSLP forms eligibility groups based on all household members regardless of their relationships.

The state verifies all information for each applicant. NSLP verifies information if it is questionable and verifies information for a statistical sample of applicants. If information is questionable, NSLP temporarily certifies children and requires verification at a later time.

In some school districts, the entire school population is certified for NSLP regardless of income.

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STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

Medical Assistance Program

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SECTION 2 – COVERAGE AND ELIGIBILITY

Citation(s)

2.1 Application, Determination of Eligibility and Furnishing Medicaid (Cont)

(5) Check off which option is used to satisfy the Screen and Enroll requirement before a child may be enrolled under title XXI.

- (a) Screening threshold established by the Medicaid agency as:
 - (i) 30 percentage of the Federal poverty level which exceeds the highest Medicaid income threshold applicable to a child by a minimum of 30 percentage points: specify FPL equals 163% for all children; or
 - (ii) ___ percentage of the Federal poverty level (that reflects the value of any differences between income methodologies of Medicaid and the Express Lane); or
- (b) Temporary enrollment pending screen and enroll.
- (c) State's regular screen and enroll process for CHIP.

(6) Check off if the State elects the option for automatic enrollment without a Medicaid application, based on data obtained from other sources and with the child's or family's affirmative consent to the child's Medicaid enrollment.

(7) Check off if the State elects the option to rely on a finding from an Express Lane agency that includes gross income or adjusted gross income shown by State income tax records or returns.

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