

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
1301 Young Street, Room 833
Dallas, Texas 75202



Division of Medicaid & Children's Health, Region VI

March 30, 2010

Our Reference: SPA-AR-10-02

Mr. Eugene Gessow, State Medicaid Director
Arkansas Department of Health & Human Services
Post Office Box 1437
Little Rock, AR 72203-1437

Dear Mr. Gessow:

We have reviewed the proposed amendment to your Medicaid State Plan submitted under Transmittal Number 10-02. This state plan amendment makes the resource limit for Qualified Medicaid Beneficiaries (QMB), Specified Low-Income Medicare Beneficiaries (SLMB) and QIs three times the Supplemental Security Income (SSI) resource limit, adjusted annually by the increase in the Consumer Price Index as set forth by the Medicare Improvement for Patients and Providers Act of 2008.

In the future, when the State submits a State Plan Amendment (SPA) that may impact Indians or Indian health providers, CMS will look for evidence of the State's tribal consultation process for that SPA. Pursuant to section 1902 (a) (73) of the Act added by section 5006 (e) of the Recovery and Reinvestment Act of 2009, the State must submit evidence to CMS regarding the solicitation of advice prior to submission of the SPA. This consultation must include all federally recognized tribes, Indian Health Service and Urban Indian Organizations within the state.

Transmittal Number 10-02 is approved with an effective date of January 1, 2010 as requested. A copy of the HCFA-179, Transmittal No. 10-02 dated December 30, 2009 is enclosed along with the approved plan pages.

If you have any questions, please contact Scott Harper at (214) 767-6564.

Sincerely,

Bill Brooks
Associate Regional Administrator

Enclosures

TRANSMITTAL AND NOTICE OF APPROVAL OF STATE PLAN MATERIAL		1. TRANSMITTAL NUMBER: 2010-002	2. STATE ARKANSAS
		3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
FOR: HEALTH CARE FINANCING ADMINISTRATION		4. PROPOSED EFFECTIVE DATE January 1, 2010	
TO: REGIONAL ADMINISTRATOR HEALTH CARE FINANCING ADMINISTRATION DEPARTMENT OF HEALTH AND HUMAN SERVICES			
5. TYPE OF PLAN MATERIAL (Check One): <input type="checkbox"/> NEW STATE PLAN <input type="checkbox"/> AMENDMENT TO BE CONSIDERED AS NEW PLAN <input checked="" type="checkbox"/> AMENDMENT			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)			
6. FEDERAL STATUTE/REGULATION CITATION: 1902(a)(10)(E), 1905(p) and 1860D-14(a)(3)(D) of the Social Security Act		7. FEDERAL BUDGET IMPACT: a. FFY 2010 \$ 312,647 b. FFY 2011 \$1,172,183	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT: Attachment 2.2-A, Pages 9b & 9b1 Attachment 2.2-A, Page 9b2 Attachment 2.6-A, Page 22 Supplement 8b to Attachment 2.6-A, Page 3		9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable): Same, Approved 04-05-05, TN 05-02 Same, Approved 05-12-95, TN 95-11 Same, Approved 07-01-93, TN 93-22 Same, Approved 10-09-02, TN 02-16	
10. SUBJECT OF AMENDMENT: The Arkansas Title XIX State Plan has been amended to increase the resource limit from two times to three times the SSI resource standard, indexed annually (since 2006) by the increase in the Consumer Price Index (CPI).			
11. GOVERNOR'S REVIEW (Check One): <input checked="" type="checkbox"/> GOVERNOR'S OFFICE REPORTED NO COMMENT <input type="checkbox"/> OTHER, AS SPECIFIED: <input type="checkbox"/> COMMENTS OF GOVERNOR'S OFFICE ENCLOSED <input type="checkbox"/> NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL			
12. SIGNING OFFICIAL: [Redacted]		16. RETURN TO: Division of Medical Services PO Box 1437, Slot S295 Little Rock, AR 72203-1437 Attention: LeAnn Edwards	
13. TYPED NAME: Eugene I. Gessow		18. DATE APPROVED: 30 March 2010	
14. TITLE: Director, Division of Medical Services			
15. DATE SUBMITTED: December 30, 2009			
FOR REGIONAL OFFICE USE ONLY			
17. DATE RECEIVED: 30 December, 2009		18. DATE APPROVED: 30 March 2010	
PLAN APPROVED - ONE COPY ATTACHED			
19. EFFECTIVE DATE OF APPROVED MATERIAL: 1 January, 2010		20. SIGNING OFFICIAL: [Redacted]	
21. TYPED NAME: Bill Brooks		22. TITLE: Associate Regional Administrator Division of Medicaid & Children's Health	
23. REMARKS:			

State: ARKANSAS

Agency*	Citation(s)	Groups Covered
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A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued)

DCO 1902(a)(10)(E)(i),
1905(p) and
1860D-14(a)(3)(D)
of the Act

25. Qualified Medicare Beneficiaries--

- Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);
- Whose income does not exceed 100 percent of the Federal poverty level; and
- Whose resources do not exceed **three times the SSI resource limit, adjusted annually by the increase in the Consumer Price Index (CPI).**

(Medical assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)

DCO 1902(a)(10)(E)(ii),
1905(p)(3)(A)(i), and
1905(s) of the Act

26. Qualified disabled and working individuals--

- Who are entitled to hospital insurance benefits under Medicare Part A under section 1818A of the Act;
- Whose income does not exceed 200 percent of the Federal poverty level; and
- Whose resources do not exceed twice the maximum standard under SSI.
- Who are not otherwise eligible for medical assistance under Title XIX of the Act.

(Medical assistance for this group is limited to Medicare Part A premiums under section 1818A of the Act.)

STATE <u>Arkansas</u>	A
DATE REC'D <u>12-30-09</u>	
DATE APPV'D <u>3-30-10</u>	
DATE EFF <u>1-1-10</u>	
HCFA 179 <u>10-02</u>	

*Agency that determines eligibility for coverage.

TN No. 10-02

Effective Date: 1-1-10

Supersedes
TN No. 05-02

Approval Date: 3-30-10

SUPERSEDES: TN- 05-02

State: ARKANSAS

Agency*

Citation(s)
Groups Covered

A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued)

DCO 1902(a)(10)(E)(iii),
1905(p)(3)(A)(ii), and
1860D-14(a)(3)(D)
of the Act

27. Specified Low-Income Medicare Beneficiaries--

- a. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);
- b. Whose income is greater than 100 percent but less than 120 percent of the Federal poverty level; and
- c. Whose resources do not exceed **three times the SSI resource limit, adjusted annually by the increase in the Consumer Price Index (CPI).**

(Medical assistance for this group is limited to Medicare Part B premiums under Section 1839 of the Act.)

DCO 1902(a)(10)(E)(iv),
1905(p)(3)(A)(ii), and
1860D-14(a)(3)(D) of the Act

28. Qualified Individuals--

- a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act);
- c. Whose income is at least 120 percent but less than 135 percent of the Federal poverty level;
- d. Whose resources do not exceed **three times the SSI resource limit, adjusted annually by the increase in the Consumer Price Index (CPI).**

(Medical assistance for this group is limited to Medicare Part B premiums under section 1839 of the Act.)

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HCFA 179 <u>10-02</u>	

TN No. 10-02

Effective Date: 1-1-10

Supersedes
TN No. 05-02

Approval Date: 3-30-10

SUPERSEDES: TN- 05-02

State: ARKANSAS

Agency*	Citation(s)	Groups Covered
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A. Mandatory Coverage – Categorically Needy and Other Required Special Groups (Continued)

1634(e) of
the Act

29. a. Each person to whom SSI benefits by reason of disability are not payable for any month solely by reason of clause (i) or (v) of Section 1611 (e)(3)(A) shall be treated, for purposes of title XIX, as receiving SSI benefits for the month.

— b. The State applies more restrictive eligibility standards than those under SSI.

Individuals whose eligibility for SSI benefits are based solely on disability who are not payable for any months solely by reason of clause (i) or (v) of Section 1611 (e)(3)(A), and who continue to meet the more restrictive requirements for Medicaid eligibility under the State plan, are eligible for Medicaid as categorically needy.

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HCFA 179 <u>10-02</u>	

*Agency that determines eligibility for coverage.

TN No. 10-02

Effective Date: 1-1-10

Supersedes
TN No. 95-11

Approval Date: 3-30-10

SUPERSEDES: TN- 95-11

State: ARKANSAS

Citation	Condition or Requirement
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7. Resource standard – Medically Needy

- 1902 (a)(10)(c)(i) of the Act
- a. Resource standards are based on family size.
- b. A single standard is employed in determining resource eligibility for all groups.
- c. In 1902(f) States, the resource standards are more restrictive than in 7.b. above for—

___ Aged
___ Blind
___ Disabled

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HCFA 179 <u>10-02</u>	

Supplement 2 to ATTACHMENT 2.6-A specifies the resource standards for all covered medically needy groups. If the agency chooses more restrictive levels under 7.c., Supplement 2 to ATTACHMENT 2.6-A so indicates.

1902(a)(10)(E),
1905(p)(1)(D), 1905(p)(2)(B)
and **1860D-14(a)(3)(D)**
of the Act

8. Resource Standard – Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries and **Qualified Individuals**

For qualified Medicare beneficiaries covered under section 1902(a)(10)(E)(i) of the Act, Specified Low-Income Medicare beneficiaries covered under section 1902(a)(10)(E)(iii) of the Act, and **Qualified Individuals covered under 1902(a)(10)(E)(iv) of the Act**, the resource standard is **three times the SSI resource limit, adjusted annually by the increase in the Consumer Price Index (CPI)**.

1902(a)(10)(E)(ii), 1905(s)
and **1860D-14(a)(3)(D)** of
the Act

9. Resource Standard – Qualified Disabled and Working Individuals

For qualified disabled and working individuals covered under section 1902(a)(10)(E)(ii) of the Act, the resource standard for an individual or a couple (in the case of an individual with a spouse) is twice the SSI resource standard.

TN No. 10-02

Supersedes TN No. 93-22

Approval Date 3-30-10 Effective Date 1-1-10

SUPERSEDES: TN- 93-22

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: ARKANSAS

MORE LIBERAL METHODS OF TREATING RESOURCES
UNDER SECTION 1902 (r) (2) OF THE ACT

☐ Section 1902 (f) State

☒ Non-Section 1902 (f) State

For ARSeniors (Section 1902(m)) **the difference between \$2,000.00 for individuals and \$3,000.00 for couples, and the QMB resource level for individuals and couples, as appropriate, is excluded;** thereby effectively setting the resource limit for ARSeniors at the appropriate QMB resource level.

SUPERSEDES: TN- 02-16

STATE <u>Arkansas</u>	A
DATE REC'D <u>12-30-09</u>	
DATE APPV'D <u>3-30-10</u>	
DATE EFF <u>1-1-10</u>	
HCFA 179 <u>10-02</u>	