
Table of Contents

State/Territory Name: South Dakota

State Plan Amendment (SPA) #: 20-0001

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) 179
- 3) Approved SPA Pages

Records / Submission Packages - View All

SD - Submission Package - SD2019MS0004O - (SD-20-0001) - Eligibility

- Summary
- Reviewable Units
- Versions
- Correspondence Log
- Analyst Notes
- Review Assessment Report
- Approval Letter
- Transaction Logs
- News
- Related Actions

CMS-10434 OMB 0938-1188

Package Information

Package ID	SD2019MS0004O	Submission Type	Official
Program Name	N/A	State	SD
SPA ID	SD-20-0001	Region	Denver, CO
Version Number	3	Package Status	Approved
Submitted By	Matthew Ballard	Submission Date	1/13/2020
Package Disposition		Approval Date	3/10/2020 3:11 PM EDT
Priority Code	P2		

DEPARTMENT OF HEALTH & HUMAN SERVICES
 Centers for Medicare & Medicaid Services
 Denver Regional Office
 1961 Stout Street Room 08-148
 Denver, CO 80294



Division of Medicaid and Children's Health Operations

March 10, 2020

Bill Snyder
 Medicaid Director
 Department of Social Services
 700 Governors Drive
 Pierre, SD 57501

Re: Approval of State Plan Amendment SD-20-0001

Dear Mr. Snyder:

On January 13, 2020, the Centers for Medicare and Medicaid Services (CMS) received South Dakota State Plan Amendment (SPA) SD-20-0001 to exclude census bureau income related to the decennial census employment from being considered as countable income..

We approve South Dakota State Plan Amendment (SPA) SD-20-0001 on March 10, 2020 with an effective date(s) of January 01, 2020.

Name	Date Created
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No items available

If you have any questions regarding this amendment, please contact Kirstin Michel at kirstin.michel@cms.hhs.gov.

Sincerely,
 James Scott
 Director
 Division of Medicaid and
 Children's Health Operations

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Package Header

Package ID SD2019MS0004O	SPA ID SD-20-0001
Submission Type Official	Initial Submission Date 1/13/2020
Approval Date 3/10/2020	Effective Date N/A
Superseded SPA ID N/A	

State Information

State/Territory Name: South Dakota

Medicaid Agency Name: Department of Social Services

Submission Component

- State Plan Amendment
- Medicaid
- CHIP

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID SD2019MS00040	SPA ID SD-20-0001
Submission Type Official	Initial Submission Date 1/13/2020
Approval Date 3/10/2020	Effective Date N/A
Superseded SPA ID N/A	

SPA ID and Effective Date

SPA ID SD-20-0001

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Non-MAGI Methodologies	1/1/2020	New
Mandatory Eligibility Groups	1/1/2020	SD-18-0002
Qualified Medicare Beneficiaries	1/1/2020	SD-13-0015 and SD-06-0007
Specified Low Income Medicare Beneficiaries	1/1/2020	SD-13-0015 and SD-06-0007
Qualifying Individuals	1/1/2020	SD-13-0015 and SD-06-0007
Optional Eligibility Groups	1/1/2020	SD-13-0015
Individuals Eligible for Cash Except for Institutionalization	1/1/2020	SD-13-0015
Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules	1/1/2020	SD-13-0015
Children under Age 19 with a Disability	1/1/2020	SD-13-0015
Work Incentives	1/1/2020	SD-13-0015 and SD-06-0007

Page Number of the Superseded Plan Section or Attachment (If Applicable):

Supplement 8a to Attachment 2.6-A Page 1 and 2 and Supplement 8b to Attachment 2.6-A Page 1

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	N/A
Superseded SPA ID	N/A		

Executive Summary

Summary Description Including Goals and Objectives The proposed State Plan Amendment clarifies that census bureau wages for temporary employment related to decennial census activities are not considered countable income.

Federal Budget Impact and Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First	2020	\$0
Second	2021	\$0

Federal Statute / Regulation Citation

SSA 1902(r)(2)

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created
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No items available

Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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Approval Date	3/10/2020	Effective Date	N/A
Superseded SPA ID	N/A		

Governor's Office Review

- No comment
- Comments received
- No response within 45 days
- Other

Submission - Public Comment

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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Superseded SPA ID	N/A		

Indicate whether public comment was solicited with respect to this submission.

- Public notice was not federally required and comment was not solicited
- Public notice was not federally required, but comment was solicited
- Public notice was federally required and comment was solicited

Indicate how public comment was solicited:

- Newspaper Announcement
- Publication in state's administrative record, in accordance with the administrative procedures requirements
- Email to Electronic Mailing List or Similar Mechanism
- Website Notice
- Public Hearing or Meeting
- Other method

Upload copies of public notices and other documents used

Name	Date Created
South Dakota Register 11.25.19	12/31/2019 4:59 PM EST



Upload with this application a written summary of public comments received (optional)

Name	Date Created
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No items available

Indicate the key issues raised during the public comment period (optional)

- Access
- Quality
- Cost
- Payment methodology
- Eligibility
- Benefits
- Service delivery
- Other issue

Submission - Tribal Input

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID SD2019MS00040	SPA ID SD-20-0001
Submission Type Official	Initial Submission Date 1/13/2020
Approval Date 3/10/2020	Effective Date N/A
Superseded SPA ID N/A	

One or more Indian Health Programs or Urban Indian Organizations furnish health care services in this state

- Yes
- No

This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.

- Yes
- No

The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA.

Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission:

Solicitation of advice and/or Tribal consultation was conducted in the following manner:

- All Indian Health Programs

Date of solicitation/consultation:

11/25/2019

Method of solicitation/consultation:

Email distribution list.

- All Urban Indian Organizations

Date of solicitation/consultation:

11/25/2019

Method of solicitation/consultation:

Email distribution list.

States are not required to consult with Indian tribal governments, but if such consultation was conducted voluntarily, provide information about such consultation below:

- All Indian Tribes

Date of consultation:

11/25/2019

Method of consultation:

Email distribution list.

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Name

Date Created

Name

State Plan Amendment 20-001 - Tribal Consultation

Date Created

12/31/2019 5:10 PM EST



Indicate the key issues raised (optional)

- Access
- Quality
- Cost
- Payment methodology
- Eligibility
- Benefits
- Service delivery
- Other issue

Medicaid State Plan Eligibility

Income/Resource Methodologies

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	New		
	User-Entered		

The state will apply the methodologies as described below, and consistent with 42 CFR 435.601, 435.602, and 435.831.

A. Basic Financial Methodology

1. The state applies the income and resource methodologies of the SSI program when determining eligibility for a population based on age (65 or older) or having blindness or a disability, with the exceptions described below in B. through G.
2. The state applies the financial methodologies of either the SSI program or the AFDC program in effect as of July 16, 1996 (whichever is most closely related) when determining eligibility for a population based on age (as a child), pregnancy, or status as a caretaker relative, with the exceptions described below in B. through G.

B. Use of Less Restrictive Methodologies

1. The state elects to apply income and/or resources methodologies that are less restrictive than those used under the cash assistance programs, in accordance with 42 CFR 435.601(d).

- Yes
- No

2. The less restrictive income and resource methodologies are described on the RU for each applicable eligibility group.

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	New User-Entered		

C. Financial Responsibility of Relatives

1. In determining financial eligibility for an individual, the state does not include income and resources from anyone other than the individual's spouse, and for individuals under age 21 or who have blindness or disability, the individual's parent.

a. The state includes the income and resources of a spouse or parent only when they are living with the individual in the same household, except as follows:

i. In the case of spouses who are age 65 or older or who have blindness or disability and who share the same room in a Medicaid institution, the state:

(1) Considers these couples either as living together or as living separately for the purpose of counting income and resources, whichever is more advantageous to the couple.

(2) Considers these couples as living separately for the purpose of counting income and resources.

ii. Where applicable, the state determines income and resource eligibility consistent with the spousal impoverishment rules of section 1924 of the Act, as described in the Resource Assessment and Eligibility reviewable unit.

b. In the case of individuals under age 21 for whom AFDC is the most closely related cash assistance program, the income and resources of parents and spouses are included only if the individual would have been considered a dependent under the state's approved AFDC state plan in effect as of July 16, 1996.

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	New User-Entered		

D. Family Size

1. The family size of an individual for whom the SSI income and resource methodologies are used (as described in section A) includes the persons identified below:

- a. The individual applying, or
- b. If the individual lives together with his or her spouse, the individual applying and the spouse, or
- c. If the individual lives together with his or her parent(s) and the individual is under 21 or has blindness or a disability, the individual applying and the parent(s).

2. The family size of an individual for whom the AFDC income and resource methodologies are used (as described in section A.), includes the persons who would have been included in the family under the state's July 16, 1996 AFDC state plan, except where the state has elected to use the MAGI-like methodologies (as described in section E).

3. The state defines family size for one or more of the following FPL eligibility groups to include others beyond those identified in D.1. and D.2.

- Yes
- No

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	New		
	User-Entered		

E. Use of MAGI-like Methodologies

1. The state uses MAGI-like methodologies for one or more populations for whom the most closely related cash assistance program would be the AFDC program in effect as of July 16, 1996.

Yes

No

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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Superseded SPA ID	New		
	User-Entered		

F. Countable Income Deductions for the Medically Needy

In determining countable income for individuals who are age 65 or older or who have blindness or a disability, the state deducts:

1. Amounts that would be deducted in determining eligibility under SSI.
2. The highest amounts that would be deducted in determining eligibility for optional state supplements if these supplements are paid to all individuals who are receiving SSI or would be eligible for SSI except for their income.

Non-MAGI Methodologies

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	New		
	User-Entered		

G. Additional Information (optional)

Medicaid State Plan Eligibility

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Package Header

Package ID	SD2019MS0004O	SPA ID	SD-20-0001
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Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-18-0002		
	System-Derived		

Mandatory Coverage

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Infants and Children under Age 19		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Parents and Other Caretaker Relatives		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Pregnant Women		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Deemed Newborns		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Former Foster Care Children		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Transitional Medical Assistance		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Extended Medicaid due to Spousal Support Collections		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
SSI Beneficiaries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Closed Eligibility Groups		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Deemed To Be Receiving SSI		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Eligibility Group Name	Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Working Individuals under 1619(b)				
Qualified Medicare Beneficiaries 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Qualified Disabled and Working Individuals 	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Specified Low Income Medicare Beneficiaries 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Qualifying Individuals 	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED

Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-18-0002		
	System-Derived		

B. The state elects the Adult Group, described at 42 CFR 435.119.

Yes No

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007 User-Entered		

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
2. Have income and resources at or below the standard for this group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: The State shall disregard Census Bureau wages for temporary employment related to decennial census activities.

- The following less restrictive methodologies are used:

Name of methodology:	Description:
In-Kind Income	The State shall disregard an amount equal to the amount of otherwise countable in-kind income received by an applicant or recipient.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- The following less restrictive methodologies are used:

Name of methodology:	Description:
Medicare Savings Program	The individual is eligible for the entire month if he or she meets the resource standard at any time during the month.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

C. Income Standard Used

The amount of the income standard for this group is 100% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and B.

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Package Header

Package ID	SD2019MS0004O	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
2. Have income below the income standard and resources at or below the resource standard for this group.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID SD2019MS00040	SPA ID SD-20-0001
Submission Type Official	Initial Submission Date 1/13/2020
Approval Date 3/10/2020	Effective Date 1/1/2020
Superseded SPA ID SD-13-0015 and SD-06-0007	
User-Entered	

B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: The State shall disregard Census Bureau wages for temporary employment related to decennial census activities.

- The following less restrictive methodologies are used:

Name of methodology:	Description:
In-Kind Income	The State shall disregard an amount equal to the amount of otherwise countable in-kind income received by an applicant or recipient.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- The following less restrictive methodologies are used:

Name of methodology:	Description:
Medicare Savings Program	The individual is eligible for the entire month if he or she meets the resource standard at any time during the month.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

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Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

Package Header

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Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet all of the following criteria:

1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
2. Are not otherwise eligible for Medicaid under the state plan.
3. Have income below the income standard and resources at or below the resource standard for this group.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
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B. Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: The State shall disregard Census Bureau wages for temporary employment related to decennial census activities.

- The following less restrictive methodologies are used:

Name of methodology:	Description:
In-Kind Income	The State shall disregard an amount equal to the amount of otherwise countable in-kind income received by an applicant or recipient.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

- The following less restrictive methodologies are used:

Name of methodology:	Description:
Medicare Savings Program	The individual is eligible for the entire month if he or she meets the resource standard at any time during the month.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

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C. Income Standard Used

Family income must be at or above 120% FPL and below 135% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	System-Derived		

A. Options for Coverage

The state provides Medicaid to specified optional groups of individuals.

Yes No

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Optional Coverage of Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Reasonable Classifications of Individuals under Age 21		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Children with Non-IV-E Adoption Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Independent Foster Care Adolescents		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Optional Targeted Low Income Children		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Individuals above 133% FPL under Age 65		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Needing Treatment for Breast or Cervical Cancer		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Eligible for Family Planning Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals with Tuberculosis		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Electing COBRA Continuation Coverage		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Aged, Blind and Disabled

Eligibility Group Name		Covered In State Plan	Include RU In Package ?	Included in Another Submission Package	Source Type ?
Individuals Eligible for but Not Receiving Cash Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Eligible for Cash Except for Institutionalization		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Optional State Supplement Beneficiaries		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals in Institutions Eligible under a Special Income Level		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
PACE Participants		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving Hospice		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children under Age 19 with a Disability		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Age and Disability-Related Poverty Level		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Work Incentives		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="radio"/>	APPROVED
Ticket to Work Basic		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Ticket to Work Medical Improvements		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Family Opportunity Act Children with a Disability		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	System-Derived		

B. Medically Needy Options for Coverage

The state provides Medicaid to specified groups of individuals who are medically needy.

Yes No

Optional Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	System-Derived		

C. Additional Information (optional)

Eligibility Groups Deselected from Coverage

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

- N/A

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Individuals who would be eligible for federal cash assistance or an optional state supplement, except for institutionalization.

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

The state covers the optional Individuals Eligible for Cash Except for Institutionalization eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are in a medical institution.
2. Would meet the eligibility requirements for at least one of the following cash assistance programs, but for the lower income standards used to determine eligibility for institutionalized individuals:
 - a. SSI
 - b. Optional State Supplement
 - c. AFDC

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

B. Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

No

2. The state covers the following populations:

- a. Individuals age 65 or older
- b. Individuals who have blindness
- c. Individuals who have a disability
- d. All children under a specified age limit:
- e. Reasonable classifications of children
- f. Parents and other caretaker relatives
- g. Pregnant women
- h. Other population

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID SD2019MS00040	SPA ID SD-20-0001
Submission Type Official	Initial Submission Date 1/13/2020
Approval Date 3/10/2020	Effective Date 1/1/2020
Superseded SPA ID SD-13-0015	
User-Entered	

C. Financial Methodologies

1. In calculating household income and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability, SSI methodologies are used. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

3. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau wages for temporary employment related to decennial census activities.

4. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

D. Income Standard Used

The income standard used is the standard of the most closely related cash assistance program.

E. Resource Standard Used

The resource standard used is the standard of the most closely related cash assistance program.

Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

F. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Individuals who would be eligible for Medicaid if they were in an institution and who receive home and community-based services.

Package Header

Package ID	SD2019MS0004O	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

The state operates the Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Would be eligible for Medicaid if in a medical institution.
2. But for the provision of home and community-based services under a waiver granted under section 1915(c), (d) or (e) of the Act:
 - a. For waivers granted under 1915(c), the individuals would otherwise require the level of care furnished in a hospital, a nursing facility or an intermediate care facility for individuals with intellectual disabilities.
 - b. For waivers granted under 1915(d) or (e), the individuals would otherwise require the level of care furnished in a hospital or nursing facility.
3. Will receive the waived services.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

B. Income and Resource Methodologies

1. The income and resource methodologies used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

2. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau wages for temporary employment related to decennial census activities.

3. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

C. Income and Resource Standards

The income and resource standards used for this group are those used to determine eligibility for a state plan group under which the individual would be eligible if in an institution.

Individuals Receiving Home and Community-Based Waiver Services under Institutional Rules

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

D. Additional Information (optional)

Medicaid State Plan Eligibility

Eligibility Groups - Options for Coverage

Children under Age 19 with a Disability

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Children under age 19 with a disability who would be eligible if they were in a medical institution (known as Katie Beckett).

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

The state operates the Children under Age 19 with a Disability eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Are under age 19 and qualify as an individual with a disability under section 1614(a) of the Act.
2. For whom the state has determined the following:
 - a. The individual requires a level of care provided in a hospital, nursing facility, or intermediate care facility for individuals with intellectual disabilities;
 - b. It is appropriate to provide such care for the child outside such an institution; and
 - c. The estimated cost for the individual's care is not greater than the cost which would otherwise be expended within an appropriate institution.
3. Would be eligible for one or more of the following Medicaid eligibility groups if in a medical institution:
 - a. Individuals in Institutions Eligible under a Special Income Level
 - b. Age and Disability-related Poverty Level
 - c. Medically Needy Individuals
 - d. Individuals Eligible for but Not Receiving Cash Assistance
 - e. Other eligibility group(s):

Children under Age 19 with a Disability

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

B. Financial Methodologies and Standards

- The income and resource methodologies and standards for the group used to determine institutional eligibility are used for this group.
- Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

- Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau wages for temporary employment related to decennial census activities.

- Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

Children under Age 19 with a Disability

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

C. Cost Effectiveness Determination

1. The cost-effectiveness determination is performed:

- a. Annually
- b. Semi-annually
- c. Other frequency:

2. The calculation is made at the individual level, using the following methodology:

- a. Standard methodology is used.

i. The cost of services for the individual at home is determined using one of the following methods:

- (1) By projecting the approved plan of care.

Description:

The total cost to the Medicaid program of services required to maintain an individual in their home will be compared to the Medicaid cost for an appropriate level of institutional care. The Medicaid cost is based on the historical costs of receiving services in the applicable type of medical institution. At any time the average cost in the home is greater than the institutional cost the payment for home care will be discontinued unless there is documentation that the home care cost will decrease to a level below institutional care within 60 days. Initial comparison of costs will use an estimated cost for home care based on the plan of care.

Costs included in the home care will be limited to those services that would be included in the institutional payment. The primary services included are: nutritional therapy or supplements; physical, speech, or occupational therapy; medical equipment; home health agency services; private duty nursing services; and personal care services. Home care services paid by a third party will not be considered in the Medicaid cost to maintain an individual in their home.

- (2) By using another method

ii. The cost of providing institutional care at the appropriate level of care for this individual is determined using the following method:

Description:

See above.

iii. At the time of the cost effectiveness determination, the cost of care for the individual at home is considered to be cost effective if it does not exceed the cost of the individual's institutional care.

Additional comments (optional):

b. An alternative methodology is used.

Children under Age 19 with a Disability

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015		
	User-Entered		

D. Additional Information (optional)

Eligibility Groups - Options for Coverage

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Individuals with a disability with income below 250% of the FPL, who would qualify for SSI except for earned income.

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007 User-Entered		

The state covers the optional Work Incentives eligibility group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Have earned income.
2. Meet the SSI definition of disability, but for earned income.
3. Meet income and resource standards following a two-step process, which includes:
 - a. Step One - A comparison of family net income to 250% FPL; and
 - b. Step Two - A comparison of individual net income and resources to the SSI standards, excluding earned income.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007 User-Entered		

B. Step One Financial Methodologies and Income Test

1. Financial methodologies

a. SSI methodologies are used in calculating family income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes

No

The less restrictive income methodologies are:

Income from household members is disregarded.

Income of the spouse is disregarded.

Description: Income of the individual's spouse is disregarded.

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau wages for temporary employment related to decennial census activities.

2. Income Test

Family net income must be less than 250% FPL. Please refer as necessary to Non-MAGI Methodologies for the definition of family size.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS00040 | SD-20-0001

Package Header

Package ID	SD2019MS00040	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007 User-Entered		

C. Step Two Financial Methodologies and Income/Resource Test

1. Financial methodologies

a. SSI methodologies are used in calculating income and resources, except that earned income is not counted. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

- Yes
- No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Disregard Census Bureau wages for temporary employment related to decennial census activities.

c. Less restrictive methodologies are used in calculating countable resources.

- Yes
- No

The less restrictive resource methodologies are:

The following less restrictive methodologies are used:

Name of methodology:	Description:
First \$6,000	The first \$6,000 of the individual's countable resources shall be excluded. All resources of the individual's spouse shall be excluded.

2. Income Test

For individuals who pass Step One, in Step Two, the individual's unearned income (plus deemed income, if appropriate) must be less than one of the following income standards:

- a. The SSI income standard.
- b. The income standard of the state supplement program.

3. Resource Test

The individual's resources must be less than the SSI resource standard.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Package Header

Package ID	SD2019MS0004O	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

D. Premiums and Cost Sharing

Requirements for premiums and cost sharing for this group are found in the premium and cost sharing sections of the state plan.

Work Incentives

MEDICAID | Medicaid State Plan | Eligibility | SD2019MS0004O | SD-20-0001

Package Header

Package ID	SD2019MS0004O	SPA ID	SD-20-0001
Submission Type	Official	Initial Submission Date	1/13/2020
Approval Date	3/10/2020	Effective Date	1/1/2020
Superseded SPA ID	SD-13-0015 and SD-06-0007		
	User-Entered		

E. Additional Information (optional)

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