

MAGI-BASED ELIGIBILITY VERIFICATION PLAN
 (Insert Medicaid, CHIP, or Both) Medicaid & CHIP
 State: Arkansas

Section A. Verification Procedures for Factors of Eligibility

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Income*	NO	NO	YES	Both are above, at or below the applicable income standard. Percent Threshold	10%	YES	YES	If attested income is below the applicable standard and data shows income above the applicable standard, if the difference is 10% or less, that is reasonably compatible. If greater than 10%, request a reasonable explanation or paper documentation if necessary. State Wage and Work Number will be used for electronic verification before requiring paper documentation. When an individual attests to income above the applicable standard and data source indicates income below the standard, the state take that attestation and make the person ineligible and screen for APTC (Advance Premium Tax Credits).
Residency	YES	NO	NO		N/A	NO	NO	

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Age (Date of Birth)	NO	NO	YES		N/A	YES	YES	HUB, SOLQ, Vital Stats and Motor Vehicle will be used for electronic verification before requiring paper documentation if the inconsistency affects eligibility. While verification of age is conducted at application, if any inconsistencies are identified which would affect eligibility, the individual would still be determined eligible, but reasonable explanation/paper documentation would be requested post enrollment.
Social Security Number **	NO	NO	YES	N/A	N/A	N/A	YES	HUB, SOLQ will be used for electronic verification before requiring paper documentation.
Citizenship **	NO	NO	YES	N/A	N/A	N/A	YES	HUB, SOLQ and SSA batch process will be used for electronic verification before requiring paper documentation.
Immigration Status **	NO	NO	YES	N/A	N/A	N/A	YES	HUB and SAVE will be used for electronic verification before requiring paper documentation.
Household Composition	YES	NO	NO		N/A	NO	NO	
Pregnancy ***	YES	NO	NO		N/A	NO	NO	
Caretaker Relative	YES	NO	NO		N/A	NO	NO	
Medicare	NO	YES	YES		N/A	NO	YES	Request a copy of the card if data source is inconsistent with attestation.

Eligibility Factor	Self-Attestation Accepted without Additional Verification (Y/N)	Self-Attestation Accepted with Post-Eligibility Verification (Y/N)	Electronic Data Source Used (Y/N)	Reasonable Compatibility Standard Used	Specify Reasonable Compatibility Standard for Income	Ask for a Reasonable Explanation from the Individual (Y/N)	Paper Documentation Required from the Individual (Y/N)	Comments
Application for Other Benefits	NO	YES	YES		N/A	NO	YES	Applicants must apply for benefits they might be eligible for. Post eligibility check of data sources to see if individual is receiving other benefits. If data sources do not show receipt of benefits, request paper documentation to show the individual has applied.
Other: (Please describe any other eligibility factors in the space below)								
<p>* States must check electronic data sources determined useful to verify income in accordance with 42 CFR 435.948 but can be done post-enrollment. If the information obtained from electronic data sources and the information provided by or on behalf of the individual are both above, at or below the applicable income standard, the State must determine the applicant eligible or ineligible for Medicaid/CHIP. (NOTE: this option is prepopulated for the state and is not an option that can be changed).</p> <p>** States must follow statute, regulations, and guidance for verification of SSN, citizenship and immigration status including obtaining such information through the federal data services hub if available.</p> <p>*** States must accept self-attestation of pregnancy unless they have information that is not reasonably compatible with such attestation.</p>								

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 State: Arkansas

Section B1. Use of Electronic Data Sources

Financial:

Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered (Y/N)	Timeliness Considered (Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered (Y/N)	Comprehensive Considered (Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g. monthly, quarterly)	Comments
1. Internal Revenue Service (IRS)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		Used at renewal only if individual provides consent
2. Social Security Administration (SSA) (SSI, Title II)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		
3. State Wage Information Collection Agency (SWICA)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		
4. State Unemployment Compensation	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		
5. State Administered Supplementary Payment Program	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable in AR
6. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		not applicable in AR
7. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		

Electronic Data Source	Determined Useful (Y/N) ¹	Accuracy Considered (Y/N)	Timeliness Considered (Y/N)	Ability to Access Considered (Y/N)	Age of Data Considered (Y/N)	Comprehensive Considered (Y/N)	Other Criteria Used (Y/N) (Please Describe in Comments section)	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post-Enrollment (Y/N)	If Data Source Used for Post-Enrollment - Frequency Used (e.g. monthly, quarterly)	Comments
8. Temporary Assistance for Needy Families (TANF)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		We expect TANF families will be receiving SNAP benefits and therefore, we will obtain verification from the SNAP data.
9. Office of Child Support Enforcement (OCSE)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		child support income not counted in MAGI so determined not useful for income verification
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		AR does have a state income tax but the data is not currently available for data matching.
11. Commercial database: (Please describe any commercial databases in the space below)												
12. Other: (Please describe any additional electronic data sources in the space below)												
Work Number	YES	YES	YES	YES	YES	YES	NO	YES	YES	NO		State plans to use this data source through the Hub, effective Day 1.
1. The state marked any criterion YES if it was considered as a reason the data source was determined useful/not useful.												

MAGI-BASED ELIGIBILITY VERIFICATION PLAN

(Insert Medicaid, CHIP, or Both)

Medicaid & CHIP

State:

Arkansas

Section B2. Use of Electronic Data Sources

Non-Financial:

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
1. Social Security Administration (SSA)	YES	YES	YES	NO	NO	YES	NO	NO	NO	YES	NO	NO	YES	NO	NO		
2. Department of Homeland Security (DHS) - SAVE	YES	NO	NO	YES	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO		
3. Vital Statistics	YES	NO	YES	NO	NO	YES	NO	NO	NO	NO	NO	YES	YES	NO	YES	Monthly	If state identifies information regarding caretaker relative that is inconsistent, they can use vital statistics to verify. An automated post-enrollment batch process with vital statistics is used to determine if eligibles had a death certificate entered into the system in the previous month.

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
4. Department of Motor Vehicles (DMV)	YES	NO	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO		If state identifies information regarding residency that is inconsistent, they can use DMV to verify.
5. Temporary Assistance for Needy Families (TANF)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
6. Supplemental Nutrition Assistance Program (SNAP)	YES	YES	NO	NO	NO	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO		Only using for SSN, if the SSN has been verified by SSA. If state identifies information regarding residency or household composition that is inconsistent, they can use SNAP to verify.
7. Office of Child Support Enforcement	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
8. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
9. Women, Infants and Children Program (WIC)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
10. State Income Tax	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
11. Commercial database: <i>(Please describe any commercial databases in the space below)</i>																	
12. PARIS*	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Quarterly	The PARIS match is used to compare eligibility with other state Medicaid programs.
13. Other: <i>(Please describe additional electronic data sources in the space provided below)</i>																	

Electronic Data Source	To Be Used (Y/N)	Social Security Number	Citizenship	Immigration Status	Residency	Age/DOB	Pregnancy	Household Composition	Caretaker Relative	Medicare	Application for other Benefits	Other	Data Source Used at Application (Y/N)	Data Source Used at Renewal (Y/N)	Data Source Used Post Enrollment (Y/N)	If Used for Post-Enrollment Frequency Used (i.e. monthly, quarterly)	Comments
Corrections	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Monthly	An automated batch process is used to determine eligibles that are incarcerated.
<p>* Under 42 CFR 435.945(d), all State Medicaid eligibility systems must conduct a match with PARIS for Interstate benefit information. If used for other purposes, please indicate in Section D.</p>																	

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) Medicaid & CHIP State: Arkansas						
Section C . Additional Factors of Eligibility for Separate CHIP						
Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
1. Applicant does not have other coverage	YES	NO	NO	NO	Must be Applied	Our CHIP program has the same verification requirement process as our regular Medicaid program.
2. Applicant does not have access to affordable ESI	YES	NO	NO	NO		
3. When child has had coverage (as applicable to states' waiting period)	YES	NO	NO	NO		
4. Access to public employee coverage					N/A	
5a. Waiting period exception #1 (describe):	YES	NO	NO	NO		The health insurance is a non-group or non-employer sponsored plan
5b. Waiting period exception #2 (describe):	YES	NO	NO	NO		The health insurance was lost through termination of employment for any reason
5c. Waiting period exception #3 (describe):	YES	NO	NO	NO		The health insurance was lost through no fault of the applicant
5d. Waiting period exception #4 (describe):	YES	NO	NO	NO		The health insurance is/was not primary comprehensive
5e. Waiting period exception #5 (describe):	YES	NO	NO	NO		Health insurance coverage is available to a child through a person other than the child's custodial adult and is determined to be inaccessible.
5f. Waiting period exception #6 (describe):					N/A	
5g. Waiting period exception #7 (describe):					N/A	
5h. Waiting period exception #8 (describe):					N/A	
5i. Waiting period exception #9 (describe):					N/A	
5j. Waiting period exception #10 (describe):					N/A	

Eligibility Factor	Self-Attestation Accepted without Additional Verification	Self-Attestation Accepted with Post-Enrollment Verification (Y/N)	Electronic Data Source Used (Y/N) <i>If Yes, please describe in comments</i>	Paper Documentation Required from the Individual (Y/N)	Non-Applicable (N/A)	Comments
6. Other eligibility factors or exceptions to eligibility factors: <i>(Please describe in the space provided below)</i>						

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State:		Medicaid & CHIP Arkansas
Section D. Additional Verification Questions		
	Question	Response
1	If paper documentation is required when a data source is not available or the information obtained from a data source is not reasonably compatible with the information provided by or on behalf of the individual, briefly describe how the state determined that establishing and using an electronic data source was not effective, considering such factors as cost and program integrity in accordance with 42 CFR 435.952(c):	The state accepts self-attestation for some factors of eligibility. For those that it doesn't, Real time and batch electronic verifications will be used before requiring paper documentation, including using vital statistics as a back-up to verify citizenship. Paper documentation will only be requested when electronic means for verification are exhausted and / or self attestation is not consistent with internal data sources. If electronic verification cannot be completed through the Federal DHS due to non-connectivity, the state will use all state electronic, sources available for verification. The state sources include Motor Vehicles, SOLQ, Vital Stats, State Quarterly Wage, State Unemployment, and the Work Number. Information from the individual will only be requested if other data sources are not available.
2	Please describe how the state uses PARIS?	The PARIS match is used to compare eligibility with other state Medicaid programs.
3	Please indicate (YES) or (NO) if the State intends to request Secretarial approval to solely use alternative data sources for financial verification other than those listed in 42 CFR 435.948 (Numbers 1-8 in Section B-1).	NO

	Question	Response
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:</p> <ol style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordability programs. 	
4	<p>Please indicate (YES) or (NO) if the State intends to request Secretarial approval to use a mechanism other than the federal data services hub for information that is available through the hub.</p>	NO
	<p>If (YES), please submit a letter to CMS requesting such approval describing how the the state meets the following requirements:</p> <ol style="list-style-type: none"> 1) Reduces administrative costs and burdens on both individuals and the State, 2) Maximizes accuracy and minimizes delay, 3) Meets the requirements related to confidentiality, disclosure, maintenance and use of information, and 4) Promotes coordination with other insurance affordability programs. 	
5	<p>Describe any additional MAGI-based eligibility verification policies and procedures that have not been covered in this verification plan (optional):</p>	None

Section A. Additional Comments
Section B1. Additional Comments
Section B2. Additional Comments
Section C. Additional Comments