

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State: Medicaid & CHIP Rhode Island								
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 the individual attests to income below the applicable standard, and data source indicates income above the applicable income standard, if the difference between the two is 10% or less, the state will consider that reasonably compatible. If the difference is greater than 10%, reasonable explanation and/or paper documentation will be requested. If the individual attests to income above the applicable standard but data sources indicate income below, the state will determine them ineligible and screen for APTC. Rhode Island will match with local data sources first, then IRS if necessary. If not reasonably compatible and individual explains a recent job loss, State would then look at unemployment data for unemployment match before requesting paper documentation.
Residency	YES	NO	NO	N/A	N/A	NO	NO	
Age (Date of Birth)	NO	YES	YES	N/A	N/A	NO	YES	Will accept attestation but will verify through SSA or DHS to ensure correct DOB for purposes of paying correct capitation rate to managed care plan (rate varies by age and gender); second tier source will be RI Department of Health data if necessary and when link to data source is available; third source will be EVVE once data match agreement is in place; will also accept birth certificate or other legal document with DOB if necessary; will use this for applying correct capitation rates but eligibility will not be denied if DOB is incorrect.
Social Security Number **	NO	NO	YES	N/A	N/A	N/A	YES	

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
Citizenship **	NO	NO	YES	N/A	N/A	N/A	YES	if verification cannot be obtained or resolved through federal hub, will go to RI Dept of Health Vital Statistics when link to data source is available, then paper documentation
Immigration Status **	NO	NO	YES	N/A	N/A	N/A	YES	will require paper documentation only if verification cannot be obtained or resolved through federal hub
Household Composition	YES	NO	NO	N/A	N/A	NO	NO	
Pregnancy ***	YES	NO	NO	N/A	N/A	NO	NO	
Caretaker Relative	YES	NO	NO	n/a	N/A	NO	NO	
Medicare	NO	NO	YES	N/A	N/A	NO	NO	If a discrepancy is found, the State will go with the data source and notify individual if the change affects their benefits.
Application for Other Benefits	NO	YES	YES		N/A	NO	YES	State is using post-enrollment verification process for this eligibility factor. Application for Other Benefits will not hold up the eligibility process while the individual is applying for benefits. State will only request paper documentation if there is a discrepancy between the attestation and data source.
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>								

MAGI-BASED ELIGIBILITY VERIFICATION PLAN													
(Insert Medicaid, CHIP, or Both)		Medicaid & CHIP											
State:		Rhode Island											
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		will check IRS if not able to determine eligible using local data sources first State will use this data source at renewal as a secondary option. State understands that to use this data source at renewal, they will need consent from the individual a year in advance. Will be able to use this information for a predetermined number of years.	
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	YES	Quarterly	will use local income data sources first before IRS data	
4. State Unemployment Compensation	YES	YES	YES	YES	YES	YES	NO	YES	YES	YES	Monthly	will use local income data sources first before IRS data; targeting implementation in December 2013; will require further agreement and technical work with state Dept of Labor & Training	
5. State Administered Supplementary Payment Program	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		Not available for Phase I (Oct. 1 2013); may add in Phase 2 of system build by May 2015	
6. State General Assistance Programs	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		Not available for Phase I (Oct. 1 2013); may add in Phase 2 of system build by May 2015	
7. Supplemental Nutrition Assistance Program (SNAP)	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		Not available for Phase I (Oct. 1 2013); may add in Phase 2 of system build by May 2015 Could use the data source to resolve inconsistencies with other data sources	
8. Temporary Assistance for Needy Families (TANF)	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		Not available for Phase I (Oct. 1 2013); may add in Phase 2 of system build by May 2015. Could use the data source to resolve inconsistencies with other data sources	

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
9. Office of Child Support Enforcement (OCSE)	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		child support information is stored in a separate system; in general, data from child support enforcement is not shareable with other agencies
10. State Income Tax	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		difficult to access state income tax data; data will often be too old to be useful
11. Commercial database: (Please describe any commercial databases in the space below)												
TALX / The Work Number	NO	YES	YES	YES	YES	YES	NO	NO	NO	NO		Due to time constraints, state will not use TALX for Oct 1, 2013 implementation; will explore for later release; target March 2014
12. Other: (Please describe any additional electronic data sources in the space below)												
1. The state marked any criterion YES if they were considered in determining the usefulness of the electronic data source; however, useful/not useful did not rest solely on these criteria.												

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) Medicaid & CHIP State: Rhode Island																	
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		verification of citizenship, DOB, and SSN are one-time only activities
2. Department of Homeland Security (DHS) - SAVE	YES	NO	NO	YES	NO	YES	NO	NO	NO	NO	NO	NO	YES	YES	YES	Other (specify in comments)	For post-enrollment and renewals, this check will only be performed for individuals whose 5-yr bar is to be met, and/or immigration statuses subject to change or expiration.
3. Vital Statistics	YES	NO	YES	NO	NO	YES	NO	NO	NO	NO	NO	NO	YES	NO	NO		
4. Department of Motor Vehicles (DMV)	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
5. Temporary Assistance for Needy Families (TANF)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		expect to use this in Phase 2 of system build by May 2015
6. Supplemental Nutrition Assistance Program (SNAP)	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		expect to use this in Phase 2 of system build by May 2015
7. Office of Child Support Enforcement	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	NO	NO	YES	Other (specify in comments)	Cooperation with child support enforcement is only required post-enrollment; Questions on application are marked as not required and will not delay eligibility determination.
8. State General Assistance Programs	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO		
9. Women, Infants and Children Program (WIC)	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
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>																	
13. Other: <i>(Please describe additional electronic data sources in the space provided below)</i>																	
12. PARIS*	YES	NO	NO	NO	NO	NO	NO	NO	NO	NO	YES	YES	NO	NO	YES	Quarterly	Rhode Island uses PARIS in post eligibility verification to ensure a client is not also receiving public benefits in
* 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.																	

MAGI-BASED ELIGIBILITY VERIFICATION PLAN (Insert Medicaid, CHIP, or Both) State: Medicaid & CHIP Rhode Island						
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	NO	YES	YES	YES	Must be Applied	use Rite Share database and calculator to determine cost-effectiveness of ESI to State; may require that applicant obtain documentation from employer about cost of ESI and benefit summary/coverage limits; same procedures apply to Medicaid expansion under Title XXI
2. Applicant does not have access to affordable ESI	NO	YES	YES	YES		use Rite Share database and calculator to determine cost-effectiveness of ESI to State; may require that applicant obtain documentation from employer about cost of ESI and benefit summary/coverage limits; same procedures apply to Medicaid expansion under Title XXI
3. When child has had coverage (as applicable to states' waiting period)					N/A	
4. Access to public employee coverage					N/A	
5a. Waiting period exception #1 (describe):					N/A	
5b. Waiting period exception #2 (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
5c. Waiting period exception #3 (describe):					N/A	
5d. Waiting period exception #4 (describe):					N/A	
5e. Waiting period exception #5 (describe):					N/A	
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	
6. Other eligibility factors or exceptions to eligibility factors: <i>(Please describe in the space provided below)</i>						

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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 many factors of eligibility, and all available electronic data sources, including vital statistics as a back up for citizenship and age/DOB when data from SSA is inconsistent with the attestation, and only requests paper documentation when the electronic data sources do not produce a match that meets reasonable compatibility standard to ensure program integrity and accurate eligibility decisions.
2	Please describe how the state uses PARIS?	Rhode Island uses PARIS in post eligibility verification to ensure a client is not also receiving public benefits in another state
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
	If (YES), please submit a letter to CMS requesting such approval describing how the state meets the following requirements: 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	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.	NO

	Question	Response
	<p>If (YES), please submit a letter to CMS requesting such approval describing how 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	Describe any additional MAGI-based eligibility verification policies and procedures that have not been covered in this verification plan (optional):	Rhode Island will utilize the Rite Share database to determine if it is most cost-effective for the State to place an applicant with access to ESI in Rite Share or Rite Care. RI utilizes a "cost-effectiveness calculator" that compares the cost and benefit structure of the ESI to Rite Care.

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