Table of Contents

State/Territory Name: Puerto Rico

State Plan Amendment (SPA) #: 22-0005

This file contains the following documents in the order listed:

- 1) NY Regional Office Approval Letter
- 2) Approved SPA pages
- 3) CMS-179 form

DEPARTMENT OF HEALTH & HUMAN SERVICES

Centers for Medicare & Medicaid Services 601 E. 12th St., Room 355 Kansas City, Missouri 64106



Medicaid and CHIP Operations Group

October 7, 2022

Dinorah Collazo Ortiz Medicaid Director Puerto Rico Medicaid Program Puerto Rico Department of Health P.O. Box 70184 San Juan, PR 00936-8184

Re: Puerto Rico State Plan Amendment (SPA) 22-0005

Dear Ms. Collazo:

The Centers for Medicare and Medicaid Services (CMS) reviewed your Medicaid State Plan Amendment (SPA) PR 22-0005 to remove the expiration date from PR SPA 21-0012 and modify the income disregard for certain categorically needy and medically needy eligibility groups in the Puerto Rico Medicaid program.

We conducted our review of your submittal according to statutory requirements in Title XIX of the Social Security Act and implementing regulations: Section 1902(a)(10)(C)(i) and 1902(r)(2); 42 CFR 436.320; 436.321 & 436.322. This letter is to inform you that we approved Puerto Rico Medicaid SPA 22-0005 on October 7, 2022, with an effective date of October 1, 2022.

If you have questions, please get in touch with Ivelisse Salce at 212-616-2411 or via email at Ivelisse.Salce@cms.hss.gov.

Sincerely,

James G. Scott, Director Division of Program Operations

cc: Nicole McKnight Ivelisse Salce

DEPARTMENT	OF HEALTH	ANDHUMAN	SERVICES
CENTERS FOR	MEDICARE	& MEDICAID	SERVICES

FORM A	PPROVED
OMB No.	0938-0193

TRANSMITTAL AND NOTICE OF APPROVA	1. TRANSMITTAL NUMBER 2. STATE 2 2 — 0 0 0 5 PR
STATE PLAN MATERIAL	
FOR: CENTERS FOR MEDICARE & MEDICAID SERV	SECURITY ACT XIX XXI
TO: CENTER DIRECTOR CENTERS FOR MEDICAID & CHIP SERVICES DEPARTMENT OF HEALTH AND HUMAN SERVICES	4. PROPOSED EFFECTIVE DATE October 1, 2022
5. FEDERAL STATUTE/REGULATION CITATION	6. FEDERAL BUDGET IMPACT (Amounts in WHOLE dollars)
§1902(a)(10)(C)(i) and §1902(r)(2) of the Social Security A	a FFY 2023 \$ 0 b FFY 2024 \$ 0
7. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMEN	The state of the s
Supplement 1 to Attachment 2.6-A, Page 1 Supplement 8A to Attachment 2.6-A, Page 1 Supplement 8A to Attachment 2.6-A, Page 2 Supplement 8b to Attachment 2.6-A, Page 1	OR ATTACHMENT (If Applicable) Supplement 1 to Attachment 2.6-A, Page 1 Supplement 8A to Attachment 2.6-A, Page 1 Supplement 8A to Attachment 2.6-A, Page 2 Supplement 8b to Attachment 2.6-A, Page 1
9. SUBJECT OF AMENDMENT	
To remove the sunset date for the Income Disregards that	increase the effective monthly income standard for the Optional Catego
O GOVERNOR'S OFFICE REPORTED NO COMMENT COMMENTS OF GOVERNOR'S OFFICE ENCLOSED NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITI	DAYTH.
11. SIGNATURE OF STATE AGENCY OFFICIAL	15. RETURN TO PUERTO RICO MEDICAID PROGRAM PUERTO RICO DEPARTMENT OF HEALTH
12. TYPED NAME Dinorah Collazo-Ortiz	PO BOX 70184 SAN JUAN PR 00926-8184
13. TITLE Program Director	
14. DATE SUBMITTED 08/26/2022	
	CMS USE ONLY
16. DATE RECEIVED 08/26/2022	17. DATE APPROVED 10/07/2022
	ED - ONE COPY ATTACHED
18. EFFECTIVE DATE OF APPROVED MATERIAL 10/01/2022	19. SIGNATURE OF ARREOVING OFFICIAL
20. TYPED NAME OF APPROVING OFFICIAL	21. TITLE OF APPROVING OFFICIAL
James G. Scott	Director, Division of Program Operations
22. REMARKS	
FORM CMS-179 (09/24) Instru	uctions on Back

SUPPLEMENT 1 TO ATTACHMENT 2.6-A

August 1991 Page 1

OMB No.: 0938-

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT Territory: <u>Puerto Rico</u>

INCOME ELIGIBILITY LEVELS

A. CATEGORICALLY NEEDY

Revision: HCFA-PM-91-4 (BPD)

Payment Standards for O A A, AB APTD, and AFDC

Family Size	Payment
1	\$64
2	\$64
3	\$96
4	\$128
5	\$160
7 to 12 add. on \$32.	\$192
13 add on \$24	

Transmittal No.: PR-22-0005 Effective Date: 10/01/2022 Supersedes TN No.: PR-21-0012 Approval Date: 10/07/2022

Revision: December 2013

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE / TERRITORY: COMMONWEALTH OF PUERTO RICO

LESS RESTRICTIVE METHODS OF TREATING INCOME UNDER SECTION 1902 (r)(2) OF THE ACT

Citation(s)	Provision(s)
	For the Medically Needy Aged, Blind, and Disabled, the amount by which an
	individual's Medicare Part B premium is reduced through enrollment in a
42 C.F.R. §436.320	Medicare Advantage Plan is disregarded from income.
42 C.F.R. §436.321	
42 C.F.R. §436.322	For all non-MAGI eligibility groups, PRMP disregards from income any
	otherwise-countable benefits received through the Value-Based Insurance
	Design (VBID) Model overseen by the Center for Medicare & Medicaid
	Innovation of the Centers for Medicare & Medicaid Services.

Transmittal No.: PR-22-0005 Effective Date: <u>10/01/2022</u> Supersedes TN No.: PR-21-0012 Approval Date: <u>10/07/2022</u>

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE / TERRITORY: COMMONWEALTH OF PUERTO RICO

LESS RESTRICTIVE METHODS OF TREATING INCOME UNDER SECTION 1902 (r)(2) OF THE ACT

Non-Modified Adjusted Gross Income (MAGI) Eligibility Evaluation: *
Income Disregard to Allow Puerto Rico Medicaid Program to Increase the Effective Monthly Income Standard for the Categorically Needy Aged, Blind and Disabled (ABD) Group and All Medically Needy Groups. **

Eligibility Monthly Income for non-MAGI:

Optional Medicaid Categorically Needy ABD and Medically Needy All Groups

	Non-MAGI		Non-MAGI			
	Optional Categorically Needy ABD ***			Medically Needy All Groups ****		
Household	Eligibility Monthly Income	Disregard	Effective Monthly Income	Eligibility Monthly Income	Disregard	Effective Monthly Income
Members	\$	\$	\$	\$	\$	\$
1	64	1,264	1,328	400	928	1,328
2	64	1,726	1,790	495	1,295	1,790
3	N/A	N/A	N/A	590	1,661	2,251
4	N/A	N/A	N/A	685	2,028	2,713
5	N/A	N/A	N/A	780	2,394	3,174
6	N/A	N/A	N/A	875	2,760	3,635
7	N/A	N/A	N/A	970	3,127	4,097
8	N/A	N/A	N/A	1,065	3,493	4,558
9	N/A	N/A	N/A	1,160	3,859	5,019
10	N/A	N/A	N/A	1,255	4,226	5,481
11	N/A	N/A	N/A	1,350	4,592	5,942
12	N/A	N/A	N/A	1,445	4,959	6,404
13	N/A	N/A	N/A	1,540	5,325	6,865
14	N/A	N/A	N/A	1,635	5,691	7,326
15	N/A	N/A	N/A	1,730	6,058	7,788
16	N/A	N/A	N/A	1,825	6,424	8,249
17	N/A	N/A	N/A	1,920	6,791	8,711
18	N/A	N/A	N/A	2,015	7,157	9,172
*	The rounding-off dollar rules are applied to the dollar amounts shown in this column. To round, Puerto Rico drops amounts under 50 cents and increases from 50 to 99 cents to the next dollar. For example, \$1.39 becomes \$1 and \$2.50 becomes \$3.					
**	Puerto Rico disregards each individual's countable earned and unearned monthly income, the amount for the appropriate household size, as described in this Table.					
***	Optional Categorically Needy ABD: 42 C.F.R. §§436.210 and 211					
****	Medically Needy All Groups: 42 C.F.R. §§436.320, 321, 322					

Transmittal No.: PR-22-0005 Effective Date: $\underline{10/01/2022}$ Supersedes TN No.: PR-21-0012 Approval Date: $\underline{10/07/2022}$

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE / TERRITORY: COMMONWEALTH OF PUERTO RICO

LESS RESTRICTIVE METHODS OF TREATING RESOURCES UNDER SECTION 1902 (r)(2) OF THE ACT

Citation(s) Provision(s)

For medically needy aged, blind and disabled individuals, Puerto Rico will disregard the difference between \$10,000 and the medically needy resource

standard.

1902(r)(2) of the Act For all non-MAGI eligibility groups, PRMP will disregard from resources any

otherwise-countable benefits received through the Value-Based Insurance Design (VBID) Model overseen by the Center for Medicare & Medicaid

Innovation of the Centers for Medicare & Medicaid Services.

Transmittal No.: PR-22-0005 Effective Date: $\frac{10/01/2022}{2000}$ Supersedes TN No.: PR-21-0012 Approval Date: $\frac{10/07/2022}{2000}$