

Implementation Guide: Medicaid State Plan Eligibility Eligibility Groups – Mandatory Coverage Adult Group

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Adult Group

POLICY CITATION

Statute: 1902(a)(10)(A)(i)(VIII)

Regulation: 42 CFR 435.119

BACKGROUND

Overview

This reviewable unit (RU) describes the eligibility group for non-pregnant adults who have household income at or below 133% of the federal poverty level (FPL). It provides the criteria under which adults may be covered under this group and the income standard. This RU is applicable only to the 50 states and the District of Columbia; a separate RU, **Adult Group – Territories**, is applicable in the territories.

The adult group is a mandatory eligibility group described in section 1902(a)(10)(A)(i)(VIII) of the Social Security Act. However, in 2012 the Supreme Court ruled in *National Federation of Independent Business (NFIB) v. Sebelius* that states are neither required to adopt nor to continue coverage under this group. Because of its placement and description in the statute, the adult group remains a mandatory Medicaid eligibility group, but states may choose whether or not to cover it. Therefore, a state must voluntarily elect the adult group in the **Mandatory Eligibility Groups RU**.

Income Eligibility

The income standard for eligibility under the adult group is 133% FPL.

Modified Adjusted Gross Income (MAGI)-based methodologies are used to determine eligibility for this group. A separate RU, **MAGI-Based Methodologies**, describes the methodologies used by the state. If the state wishes to make a change to its MAGI-based methodologies, it must amend the **MAGI-Based Methodologies RU**.

Other Requirements

In addition to meeting the income standard for the adult group, eligible individuals must be:

- Age 19 or older but under age 65;
- Non-pregnant;
- Not otherwise eligible for and enrolled in Medicaid under a mandatory group, including the group for former foster care children; and
- Not entitled to or enrolled in Medicare Part A or B.

Under regulations at 42 CFR 435.119, a state may not provide Medicaid under the adult group to a parent or other caretaker relative living with a child unless the child is receiving coverage under Medicaid or CHIP, or is otherwise enrolled in “minimum essential coverage” as defined in 42 CFR 435.4. For purposes of this requirement, a child includes a dependent child under age 19 (i.e., up to and including age 18) who is living with the parent or other caretaker relative. In states that, as of March 23, 2010, had elected to provide Medicaid to all children up to age 20 or

21 under 42 CFR 435.222 (the reasonable classification of children group), a child for purposes of this requirement includes a dependent child up to such age as the state has elected (age 20 or 21) who is living with the parent or other caretaker relative.

Individuals eligible for the adult group do not have to meet historical categorical requirements such as blindness, disability, or caring for a dependent child. In 209(b) states, SSI recipients may qualify under this eligibility group if they do not meet the requirements for the mandatory coverage group described in 42 CFR 435.121 that serves individuals 65 years old and older, or who have blindness or disabilities.

If enrollment in a non-MAGI group would better meet an individual's needs, eligible individuals will be able to enroll in a non-MAGI group rather than the adult group. Individuals who meet the eligibility criteria for the adult group will be able to receive coverage on that basis while they undergo a final determination of eligibility for a non-MAGI group. Once determined eligible under a non-MAGI group, the individual is no longer eligible under the adult group (unless his or her circumstances change). Similarly, if an individual eligible under the adult group develops a disability or a need for long-term services and supports, he or she will be able to move to a non-MAGI group based on disability or long-term care needs.

If a woman indicates on the application that she is pregnant, she should be enrolled in Medicaid coverage as a pregnant woman because the adult group specifies that pregnant women are not eligible. After enrollment in the adult group, states are not required to track pregnancy status. Women who enroll in the adult group who later become pregnant will have the option of either staying enrolled in the adult group until redetermination, or requesting that the state move them to a pregnancy-related eligibility group. This is most likely to occur if a woman needs specific benefits that are not available under the adult group benchmark benefit package.

REVIEWABLE UNIT DEPENDENCIES

Many RUs in MACPro are dependent upon other RUs. Each time a primary RU is changed, there could be an effect on other, secondary RUs which are dependent on the primary. For example, in the **Mandatory Eligibility Groups** RU, there is question as to whether the state covers the Adult Group. If **Yes** is selected, and if a box is checked to include the Adult Group in the submission package, then the **Adult Group** RU will be included by the system in the package and the user can navigate to it to complete it. If **No** is selected, the **Adult Group** RU will not be included in the package. In this example, the **Mandatory Eligibility Groups** RU is the **Primary RU** and the **Adult Group** RU is the **Secondary RU**. The **Adult Group** RU is considered to be dependent on selections made in the **Mandatory Eligibility Groups** RU.

Whenever a change in a primary RU may affect a secondary RU, you either need to revise the secondary RU (if it is already in the package) or add the secondary RU to the package so that it can be updated in the same submission package as the primary RU.

The following table explains the dependent relationships for the **Adult Group** RU:

Primary RU	Secondary RU	Nature of Dependency	Actions Needed
Mandatory Eligibility Groups	Adult Group	In section B of the Mandatory Eligibility Groups RU (primary), Yes must be selected to <i>The state elects the Adult Group, described at 42 CFR 435.119</i> and the Adult Group must be selected in the Include RU in Package column in order for the Adult Group RU (secondary) to be included in the submission package for completion or modification.	In order to complete or modify the secondary RU, you must include the primary RU in the package, indicate that you cover the Adult Group , and check that you want to include it in the package. <ul style="list-style-type: none"> Once the primary RU has been saved, you will be able to navigate to the secondary RU.
Financial Eligibility Requirements for Non-MAGI Groups	Adult Group	If 209(b) State is selected in section B of the Financial Eligibility Requirements for Non-MAGI Groups RU (primary), the following text displays in the Adult Group RU: Note: In 209(b) states, individuals receiving SSI or deemed to be receiving SSI who do not qualify for mandatory Medicaid eligibility due to more restrictive requirements may qualify for this eligibility group if otherwise eligible.	<ul style="list-style-type: none"> If you change your election in section B of the primary RU from 209(b) State to Section 1634 State or SSI Criteria State, you must include the secondary RU in the same submission package, as this statement should no longer display in the secondary RU. The system will automatically remove the statement in the secondary RU after the primary RU is saved and validated.

INSTRUCTIONS

A. Characteristics

There are statements describing the characteristics of this eligibility group.

At **A.5.**, there is an additional statement that in 209(b) states, individuals receiving SSI may qualify to this eligibility group. This statement will appear only if *209(b) State* has been selected in the **Financial Eligibility Requirements for Non-MAGI Groups** RU.

B. Financial Methodologies

There is a statement that MAGI-based methodologies are used in calculating household income for this eligibility group. A separate RU, **MAGI-Based Methodologies**, describes the MAGI-based methodologies used by the state.

If you wish to view the state's methodologies, select the *View approved version of MAGI-Based Methodologies* link.

- The **MAGI-Based Methodologies** RU will appear if there is an approved version in the MACPro system.
- If there is no approved version of the RU in MACPro, a screen will appear with the following message: "There is no approved version of this reviewable unit in MACPro available to display."
- Select the *Adult Group* link to return to the **Adult Group** RU.

C. Income Standard Used

There is a statement that the amount of the income standard for this group is 133% FPL.

D. Coverage of Dependent Children

Select one of the choices to specify the age to which children must be covered, which is either age 19 or a higher age to which children were covered in your state on March 23, 2010 under 42 CFR 435.222.

- If *A higher age...* at **D.2.** is selected, select one of the options to indicate which higher age was covered under 42 CFR 435.222.

E. Additional Information (optional)

Except in limited circumstances, this field remains blank. Please consult with CMS before adding any additional information concerning this RU.

REVIEW CRITERIA

The Financial Eligibility Requirements for Non-MAGI Groups RU needs to be approved in MACPro or included in the same submission package as the Adult Group RU.

The age of dependent children specified in section D must be consistent with coverage of children in the state as of March 23, 2010. If the state covered children up to age 20 or age 21 as of that date in a reasonable classification of children, then the state must make the appropriate selection at D.2.