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**State/Territory Name: Washington**

**State Plan Amendment (SPA) #: 22-0034**

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- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

# WA - Submission Package - WA2023MS0001O - (WA-22-0034) - Eligibility

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DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Medicaid and CHIP Operations Group  
601 E. 12th st., Room 335  
Kansas City, MO 64106



## Center for Medicaid & CHIP Services

February 02, 2023

Sue Birch  
Health Care Authority Director  
Health Care Authority  
PO Box 45502  
Olympia, WA 98504

Re: Approval of State Plan Amendment WA-22-0034

Dear Sue Birch,

On January 12, 2023, the Centers for Medicare and Medicaid Services (CMS) received Washington State Plan Amendment (SPA) WA-22-0034, which proposed to disregard all countable resources in determining eligibility for the QMB, SLMB, and QI eligibility groups.

We approve Washington State Plan Amendment (SPA) WA-22-0034 with an effective date(s) of January 01, 2023.

If you have any questions regarding this amendment, please contact Edwin Walaszek at [edwin.walaszek1@cms.hhs.gov](mailto:edwin.walaszek1@cms.hhs.gov), or, at (212)-616-2512.

Sincerely,  
James G. Scott  
Director, Division of Program Operations  
Center for Medicaid & CHIP Services

# WA - Submission Package - WA2023MS0001O - (WA-22-0034) - Eligibility

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CMS-10434 OMB 0938-1188

## Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

### Package Header

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
<b>Submission Type</b>	Official	<b>Initial Submission Date</b>	1/12/2023
<b>Approval Date</b>	2/2/2023	<b>Effective Date</b>	N/A
<b>Superseded SPA ID</b>	N/A		

### State Information

**State/Territory Name:** Washington

**Medicaid Agency Name:** Health Care Authority

### Submission Component

- State Plan Amendment
- Medicaid
- CHIP

## Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

### Package Header

**Package ID** WA2023MS0001O  
**Submission Type** Official  
**Approval Date** 2/2/2023  
**Superseded SPA ID** N/A

**SPA ID** WA-22-0034  
**Initial Submission Date** 1/12/2023  
**Effective Date** N/A

### SPA ID and Effective Date

**SPA ID** WA-22-0034

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Mandatory Eligibility Groups	1/1/2023	WA-21-0002
Qualified Medicare Beneficiaries	1/1/2023	WA-21-0002
Specified Low Income Medicare Beneficiaries	1/1/2023	WA-21-0002
Qualifying Individuals	1/1/2023	WA-21-0002

## Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

### Package Header

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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<b>Superseded SPA ID</b>	N/A		

### Executive Summary

**Summary Description Including Goals and Objectives** Medicaid State Plan Amendment (SPA) 22-0034 will remove the asset test for all Medicaid Savings Programs (MSPs). MSPs help with Medicare co-pays, deductibles, and monthly premiums for qualified recipients. In SPA 22-0034, HCA will eliminate the requirement to verify a recipient's resources/assets effective January 1, 2023. Eliminating the asset test for Medicare Savings Programs will allow more low-income Medicare recipients to qualify and brings more federal resources, such as the Low-Income Subsidy (LIS) drug benefit, to more needy individuals. The result allows individuals to keep more of their income for other necessary things, reduces administrative burden, and puts more federal money into our local economy. Additionally, this means more people will have their Medicare premiums paid, providing greater access to medical care.

SPA 22-0034 is expected to save enrollees in MSP programs approximately \$2,000 in annual Part B premiums and, through Extra Help (also known as Limited Income Subsidy [LIS]), an estimated \$3,300 in drug costs—income that program recipients use toward food, housing, and other basic living expenses. This is good public policy. Without the MSPs, many of these individuals may be forced to choose between these necessities and the cost of drugs or medical care. Rather than exclude low-income individuals with modest savings from the program, Washington should protect its most vulnerable population from an increasingly complex, costly healthcare system and eliminate the asset test for MSPs.

Additional context: health law advocates are also interested as there is a national effort to address the “Medicare cliff.” Eliminating the asset test is one of the areas within that effort.

### Federal Budget Impact and Statute/Regulation Citation

#### Federal Budget Impact

	Federal Fiscal Year	Amount
First	2022	\$9200000
Second	2023	\$17400000

#### Federal Statute / Regulation Citation

1902(a) of the Act

Supporting documentation of budget impact is uploaded (optional).

Name	Date Created	
No items available		

## Submission - Summary

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

### Package Header

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**SPA ID** WA-22-0034  
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**Effective Date** N/A

### Governor's Office Review

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

**Describe** Exempt

PRA Disclosure Statement: Centers for Medicare & Medicaid Services (CMS) collects this mandatory information in accordance with (42 U.S.C. 1396a) and (42 CFR 430.12); which sets forth the authority for the submittal and collection of state plans and plan amendment information in a format defined by CMS for the purpose of improving the state application and federal review processes, improve federal program management of Medicaid programs and Children's Health Insurance Program, and to standardize Medicaid program data which covers basic requirements, and individualized content that reflects the characteristics of the particular state's program. The information will be used to monitor and analyze performance metrics related to the Medicaid and Children's Health Insurance Program in efforts to boost program integrity efforts, improve performance and accountability across the programs. Under the Privacy Act of 1974 any personally identifying information obtained will be kept private to the extent of the law. According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1188. The time required to complete this information collection is estimated to range from 1 hour to 80 hours per response (see below), including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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CMS-10434 OMB 0938-1188

## Medicaid State Plan Eligibility

### Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

#### Package Header

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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<b>Superseded SPA ID</b>	WA-21-0002		
	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 type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Parents and Other Caretaker Relatives		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Pregnant Women		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED
Deemed Newborns		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Former Foster Care Children		<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="radio"/>	NEW
Transitional Medical Assistance		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Extended Medicaid due to Spousal Support Collections		<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
SSI Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Closed Eligibility Groups		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Individuals Deemed To Be Receiving SSI		<input 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)		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Qualified Medicare Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Qualified Disabled and Working Individuals		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	NEW
Specified Low Income Medicare Beneficiaries		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED
Qualifying Individuals		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	APPROVED

# Mandatory Eligibility Groups

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034




## Package Header

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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<b>Superseded SPA ID</b>	WA-21-0002 System-Derived		

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

Yes  No

### Families and Adults

Eligibility Group Name		Covered In State Plan	Include RU In Package 	Included in Another Submission Package	Source Type 
Adult Group		<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	CONVERTED

### 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 | WA2023MS0001O | WA-22-0034

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

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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<b>Superseded SPA ID</b>	WA-21-0002		
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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 | WA2023MS0001O | WA-22-0034

## Package Header

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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:** Wages paid by the Census Bureau for temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Income tax obligation	Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility
MSP	When determining the available income of an individual for the QMB or SLMB program the agency shall exclude from countable income an amount equal to that expended on medical expenses.

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

- Yes  
 No

The less restrictive resource methodologies are:

All resources are disregarded. No resource test is applied.

# Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

## Package Header

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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## 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 | WA2023MS0001O | WA-22-0034

### Package Header

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### F. Additional Information (optional)

# Medicaid State Plan Eligibility

## Eligibility Groups - Mandatory Coverage

### Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

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

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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<b>Superseded SPA ID</b>	WA-21-0002		
	System-Derived		

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 | WA2023MS0001O | WA-22-0034

## Package Header

**Package ID** WA2023MS0001O  
**Submission Type** Official  
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System-Derived

**SPA ID** WA-22-0034  
**Initial Submission Date** 1/12/2023  
**Effective Date** 1/1/2023

## 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:** Wages paid by the Census Bureau for temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Income tax obligation	Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility
MSP	When determining the available income of an individual for the QMB or SLMB program the agency shall exclude from countable income an amount equal to that expended on medical expenses.

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

- Yes  
 No

The less restrictive resource methodologies are:

All resources are disregarded. No resource test is applied.



# Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

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## 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

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## F. Additional Information (optional)

# Medicaid State Plan Eligibility

## Eligibility Groups - Mandatory Coverage

### Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

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

<b>Package ID</b>	WA2023MS0001O	<b>SPA ID</b>	WA-22-0034
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	System-Derived		

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 | WA2023MS0001O | WA-22-0034

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**Effective Date** 1/1/2023

## 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:** Wages paid by the Census Bureau for temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:	Description:
Income tax obligation	Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility

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

- Yes
- No

The less restrictive resource methodologies are:

All resources are disregarded. No resource test is applied.

## Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WA2023MS0001O | WA-22-0034

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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 | WA2023MS0001O | WA-22-0034

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