# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT MEDICAL ASSISTANCE PROGRAM

State/Territory: ALABAMA

<u>Citation</u> As a condition for receipt of Federal funds under

Approval Date: 6-24-13

Title XIX of the Social Security Act, the

42 CFR 430.10

# Alabama Medicaid Agency

Submits the following State plan for the medical Assistance program, and hereby agrees to administer the program in accordance with the provisions of this State plan, the requirements of titles XI and XIX of the Act, and all applicable Federal regulations and other official issuances of the Department.

Effective Date: 04/01/13

State: <u>ALABAMA</u>

### SECTION 1 SINGLE STATE AGENCY ORGANIZATION

<u>Citation</u>
42 CFR 431.10
AT-79-29

# 1.1 Designation and Authority

(a) The Alabama Medicaid Agency is the single State agency designated to administer or supervise the administration of the Medicaid program under title XIX of the Social Security Act. (All references in this plan to "the Medicaid agency" mean the agency named in this paragraph.)

ATTACHMENT 1.1-A is a certification signed by the State Attorney General identifying the single State agency and citing the legal authority under which it administers or supervises administration of the program.

TN No. <u>AL-13-003</u> Supersedes TN No. <u>AL-77-3</u>

State: ALABAMA

#### SECTION 1 SINGLE STATE AGENCY ORGANIZATION

<u>Citation</u> 42 CFR 431.11

- 1.2 Organization for Administration
  - (a) <u>ATTACHMENT 1.2-A</u> contains a description of the organization and functions of the Medicaid agency and an organization chart of the agency.
  - (b) Alabama Medicaid Agency
    has been designated as the medical
    assistance unit. ATTACHMENT 1.2-B
    contains a description of the
    organization and functions of the
    medical assistance unit and an
    organization chart of the unit.
  - (c) <u>ATTACHMENT 1.2-C</u> contains a description of the kinds and numbers of professional medical personnel and supporting staff used in the administration of the plan and their responsibilities.
  - (d) Eligibility determinations are made by State or local staff of an agency other than the agency named in paragraph 1.1(a). ATTACHMENT 1.2-D contains a description of the staff designated to make such determinations and the functions they will perform.

 $\square$  Not applicable. Only staff of the agency named in paragraph 1.1(a) make such determinations.

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TN No. <u>AL-13-003</u> Supersedes TN No. <u>AL-74-3</u>

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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT STATE OF ALABAMA

Eligibility Determination Staff and Functions

There are four agencies in Alabama that certify individuals for Medicaid. These agencies certify certain groups of individuals for Medicaid based on their circumstances.

These agencies are:

The Social Security Administration (SSA),

The Alabama Department of Public Health (ADPH),

The Department of Human Resources (DHR), and

The Alabama Medicaid Agency (AMA).

The Social Security Administration certifies individuals for the following programs: Alabama is a Section 1634 state and accepts Social Security Administration's eligibility determination for aged, blind, or disabled persons who have low income that may qualify for cash assistance through the Supplemental Security Income (SSI) program. Individuals eligible for Supplemental Security Income (SSI) are automatically eligible for Medicaid.

<u>The Department of Human Resources certifies individuals for the following programs:</u> Foster children and children who receive State or Federal Adoption Assistance, poverty level pregnant women, children under age 19, section 1931 Medicaid for Low Income Families Program (MLIF), and Plan First Waiver.

<u>The Alabama Department of Public Health certifies individuals for the following programs:</u>
Nursing Home Program, Hospital Program, Post Hospital Extended Care (PEC) Program,

Nursing Home Program, Hospital Program, Post Hospital Extended Care (PEC) Program, Institutional Care Facility for the Mentally Retarded (ICF-MR) Program, Home and Community Based Waiver for Person with Intellectual Disabilities (ID), Elderly and Disabled Waiver, State of Alabama Independent Living (SAIL) Waiver, HIV/AIDS Waiver, OBRA Waiver, Living at Home (LAH) Waiver, Technology Assisted Waiver for Adults, Alabama Community Transition (ACT) Waiver, Newborn Program, Program of All-Inclusive Care for the Elderly (PACE), poverty level pregnant women, children under age 19, section 1931 Medicaid for Low Income Families Program (MLIF), Plan First Waiver **SSI related groups:** Widow/Widower, Disabled Adult Child, Retroactive SSI, Children of SSI Mothers, Continuous (PICKLE), Grandfathered Children. **Medicare related groups:** Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, Qualifying Income Individuals and Qualified Disabled Working Individuals.

The Alabama Medicaid Agency certifies individuals for the following programs: Poverty level pregnant women, children under age 19, Plan First Waiver, Breast and Cervical Cancer Program (BCC), Nursing Home Program, Hospital Program, Post Hospital Extended Care (PEC) Program, Institutional Care Facility for the Mentally Retarded (ICF-MR) Program, Home and Community Based Waiver for Person with Intellectual Disabilities (ID), Elderly and Disabled Waiver, State of Alabama Independent Living (SAIL) Waiver, HIV/AIDS Waiver, OBRA Waiver, Living at Home (LAH) Waiver, Technology Assisted Waiver for Adults, Alabama Community Transition (ACT) Waiver, Newborn Program, Program of All-Inclusive Care for the Elderly (PACE), SSI related groups: Widow/Widower, Disabled Adult Child, Retroactive SSI, Children of SSI Mothers, Continuous (PICKLE), Grandfathered Children. Medicare related groups: Qualified Medicare Beneficiaries, Specified Low-Income Medicare Beneficiaries, Qualifying Income Individuals and Qualified Disabled Working Individuals, Others: Emergency Services for Aliens, Department of Youth Services (DYS) Children; Refugees and section 1931 MLIF; and Child Health Insurance Program (CHIP).

TN No. AL-13-003

Supersedes Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

TN No. AL-94-14

## 1. Eligibility Staff and Functions

# a. Financial Support Worker I and II (DHR)

This is a DHR position which determines eligibility for foster children and children who receive State or Federal Adoption Assistance, MAGI related groups, section 1931 MLIF and Emergency Services.

### b. Medicaid Eligibility Specialist (AMA)

This is an AMA position which determines eligibility for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

# c. Medicaid Eligibility Specialist, Senior (AMA)

This is an AMA position which determines eligibility for all Aged, Blind, and Disabled coverage groups not administered through the Social Security Administration.

# d. Public Health Social Worker I and II (ADPH)

This is an ADPH position which determines eligibility for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

### e. Public Health Social Worker III (ADPH)

This is an ADPH position which determines eligibility for all Aged, Blind, and Disabled coverage groups not administered through the Social Security Administration.

### 2. Supervisory and Administrative Staff

## a. Administrative Assistant I, II and III (AMA, ADPH, and DHR)

Duties for these positions include filing, sorting mail, typing documents, proofreading documents, making copies, greeting and directing the public, taking telephone messages, posting/logging transmittal records or making simple calculations. These positions process annual eligibility redeterminations for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

TN No. AL-13-003

Supersedes TN No. AL-94-14 Approval Date <u>6-24-13</u>

## b. Medical Care Benefits Specialist I and II (AMA)

Duties for these positions include performing administrative functions such as time and attendance reports, travel requests, activity reports, scheduling/planning meetings, and distribution of mail throughout the division. These positions process annual eligibility redeterminations for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

### c. Health Insurance Assistant (AMA and ADPH)

This position determines eligibility for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

### d. Health Insurance Specialist (AMA and ADPH)

This position determines eligibility for MAGI related groups, section 1931 MLIF, Emergency Services, Plan First Waiver, Refugees, and Medicare related groups.

# e. Medicaid Eligibility Specialist Supervisor (AMA)

This position provides supervision to previous classifications and performs eligibility determination oversight.

## f. Medicaid Eligibility Manager (AMA)

This position provides supervision to previous classifications and performs eligibility determination oversight.

### g. Medicaid Administrator II and III (AMA)

This position provides supervision to previous classifications and performs eligibility determination oversight.

#### h. Program Supervisor (DHR)

This position provides supervision to previous DHR classifications and performs eligibility determination oversight.

Effective Date: 04/01/13

Revision: HCFA-PM-91-4 (BPD) AL-13-003

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OMB NO.: 0938-

# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

GROUPS COVERED AND AGENCIES RESPONSIBLE FOR ELIGIBILITY DETERMINATION						
Agency*	Citation(s)			Groups Covered		
The following	ng groups are cov	Mano	latory Co	overage - Categorically Needy and Other Required		
DHR <u>AMA</u> 42 CFR 435.		<u>Spect</u> 1.	al Group Recip	ients of AFDC		
			The a	pproved State AFDC plan includes:		
			$\boxtimes$	Families with an unemployed parent for the mandatory 6-month period and an optional extension of 6_months.		
				Pregnant women with no other eligible children.		
				AFDC children age 18 who are full-time students in a secondary school or in the equivalent level of vocational or technical training.		
DHR <u>AMA A</u> 42 CFR 435.1	ADDU		The standards for AFDC payments are listed in Supplement 1 of <u>ATTACHMENT 2.6-A</u> .			
	<del></del>	2.	Deem	Deemed Recipients of AFDC		
			a.	Individuals denied a title IV-A cash payment solely because the amount would be less than \$10.		

TN No: AL 13-003

Supersedes

TN No: AL-91-36

Approval Date: <u>6-24-13</u>

Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-91-4 (BPD) AL-13-003

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OMB NO.: 0938-

State: Alabama

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Agency\* Citation(s)

Groups Covered

# A. <u>Mandatory Coverage - Categorically Needy and</u> Other Required Special Groups (Continued)

2. Deemed Recipients of AFDC.

DHR AMA ADPH Sec. 1902(a)(10)(A) (i)(I)of the Act 42 USC § 1396a

b. Effective October 1, 1990,
participants in a work supplementation
program under title IV-A and any child
or relative of such individual (or
other individual living in the same
household as such individuals) who
would be eligible for AFDC if there
were no work supplementation program,
in accordance with section 482(e)(6)
of the Act.

DHR AMA ADPH Sec. 402(a)(22)(A) of the Act 42 USC § 602

- c. Individuals whose AFDC payments are reduced to zero by reason of recovery of overpayment of AFDC funds.
- DHR AMA ADPH 406(h), Sec. 1931, Sec. 1902(a)(10)(A)(i)(I), and Sec. 1925 of the Act 42 USC § 1396a 42 USC § 1396r-6 42 USC § 1396u-1 42 CFR 435.112
- d. An assistance unit deemed to be receiving AFDC for a period of four calendar months because the family becomes ineligible for AFDC as a result of collection or increased collection of support and meets the requirements of section 406(h) of the Act.

DHR AMA ADPH Sec. 1902(a) of the Act

42 USC § 1396a

e. Individuals deemed to be receiving AFDC who meet the requirements of section 473(b)(1) or (2) for whom an adoption assistance agreement is in effect or foster care maintenance payments are being made under title IV-E of the Act.

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Supersedes

TN No: AL-91-36

<sup>\*</sup>Agency that determines eligibility for coverage.

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Agency\*

Groups Covered Citation(s)

> Mandatory Coverage - Categorically Needy and A. Other Required Special Groups (Continued)

DHR AMA ADPH Sec. 407(b), 1902 (a)(10)(A)(i)and 1905(m)(1) of the Act 42 USC § 1396a 42 USC § 1396d

3. Qualified Family Members (Medicaid Only)

See Item A.10, pg 4a.

DHR AMA ADPH

Sec. 1902(a)(52) and 1925 of the Act 42 USC § 1396a 42 USC § 1396 r-6 4. Families terminated from AFDC solely because of earnings, hours of employment, or loss of earned income disregards entitled up to twelve months of extended benefits in accordance with section 1925 of the Act. (This provision expires on September 30, 1998.)

TN No: AL 13-003

Supersedes

TN No: AL-91-36

Effective Date: 04/01/13 Approval Date: 6-24-13

<sup>\*</sup>Agency that determines eligibility for coverage.

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OMB NO.: 0938-

State: Alabama

Citation(s)

Groups Covered

A. <u>Mandatory Coverage - Categorically Needy and</u> <u>Other Required Special Groups</u> (Continued)

DHR AMA<u>ADPH</u> 42 CFR 435.113

Agency\*

- 5. Individuals who are ineligible for AFDC solely because of eligibility requirements that are specifically prohibited under Medicaid. Included are:
  - a. Families denied AFDC solely because of income and resources deemed to be available from--
    - (1) Stepparents who are not legally liable for support of stepchildren under a State law of general applicability;
    - (2) Grandparents;
    - (3) Legal guardians; and
    - (4) Individual alien sponsors (who are not spouses of the individual or the individual's parent);
  - b. Families denied AFDC solely because of the involuntary inclusion of siblings who have income and resources of their own in the filing unit.
  - c. Families denied AFDC because the family transferred a resource without receiving adequate compensation.

TN No: AL-13-003

Supersedes

TN No: AL-91-36

<sup>\*</sup>Agency that determines eligibility for coverage.

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s)

**Groups Covered** 

A. <u>Mandatory Coverage - Categorically Needy and</u> <u>Other Required Special Groups</u> (Continued)

DHR <u>AMA ADPH</u> 42 CFR 435.114

- 6. Individuals who would be eligible for AFDC except for the increase in OASDI benefits under Pub. L. 92-336 (July 1, 1972), who were entitled to OASDI in August 1972, and who were receiving cash assistance in August 1972.
  - \_ Includes persons who would have been eligible for cash assistance but had not applied in August 1972 (this group was included in this State's August 1972 plan).
  - \_ Includes persons who would have been eligible for cash assistance in August 1972 if not in a medical institution or intermediate care facility (this group was included in this State's August 1972 plan).
  - Not applicable with respect to intermediate care facilities; State did or does not cover this service.

DHR AMA ADPH

Sec. 1902(a)(10) (A)(i)(III) and 1905(n) of the Act

42 USC § 1396a 42 USC § 1396d

- 7. Qualified Pregnant Women and Children.
  - a. A Pregnant woman whose pregnancy has been medically verified who--
    - (1) Would be eligible for an AFDC cash payment if the child had been born and was living with her;

TN No: AL-13-003

Supersedes

TN No: AL-91-36

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-92-1 (MB) February 1992

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# STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

# COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation(s)		Groups Covered				
	A.	Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)				
		7.	a.	(2)	Is a member of a family that would be eligible for aid to families with dependent children of unemployed parents if the State had an AFDC-unemployed parents program; or	
DUD AMA ADDU				(3)	Would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan.	
DHR AMA ADPH Sec. 1902(a)(10)(A) (i)(III) and 1905(n) of the Act 42 USC § 1396a 42 USC § 1396d			b.	who a eligib basis requii	ren born after September 30, 1983 are under age 19 and who would be alle for an AFDC cash payment on the of the income and resource rements of the State's approved C plan.	
				_ Ch	ildren born after	
					(specify optional earlier date) who are under age 19 and who would be eligible for an AFDC cash payment on the basis of the income and resource requirements of the State's approved AFDC plan.	

TN No: AL-13-003

Supersedes

TN No: <u>AL-91-36</u>

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u> Revision: HCFA-PM-91-4 (BPD) AL-13-003

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Effective Date: <u>04/01/13</u>

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OMB NO.: 0938-

State: Alabama

Agency\* **Groups Covered** Citation(s) DHR AMA ADPH Sec. 1902(a)(10) 10. Individuals other than qualified pregnant women and children under item A.7. above (A)(i)(V) and 1905(m) of the who are members of a family that would be receiving AFDC under section 407 of the Act Act 42 USC § 1396a if the State had not exercised the option under section 407(b)(2)(B)(i) of the Act to 42 USC § 1396d limit the number of months for which a family may receive AFDC.

TN No: AL-13-003

Supersedes

Approval Date: <u>6-24-13</u> TN No: AL-91-36

Revision: HCFA-PM-92-1 (MB) AL-13-003 February 1992 ATTACHMENT 2.2-A

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### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

### COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation(s) **Groups Covered** Mandatory Coverage - Categorically Needy and A. Other Required Special Groups (Continued) DHR AMA ADPH 10. Sec. 1902(a)(10) Individuals other than qualified women and children under item A.7. above (A)(i)(V) and 1905 of the Act who are members of a family that would 42 USC § 1396a be receiving AFDC under section 407 of the Act if the State had not exercised the option under section 407(b)(2)(B)(i) of the Act to limit the number of months for which a family may receive AFDC. DHR AMA ADPH Sec. 1902(e)(5) -AA woman who, while pregnant, was a. eligible for, applied for, and of the Act 42 USC § 1396a receives Medicaid under the approved State plan on the day her pregnancy ends. The woman continues to be eligible, as though she were pregnant, for all pregnancy-related and postpartum medical assistance under the plan for a 60-day period (beginning on the last day of her pregnancy) and for any remaining days in the month in which the 60th day falls. DHR AMA ADPH Sec. 1902(e)(6) A pregnant woman who would otherwise b. lose eligibility because of an of the Act 42 USC § 1396a increase in income (of the family in which she is a member) during the pregnancy of the postpartum period which extends through the end of the month in which the 60-day period (beginning on the last day of pregnancy) ends.

TN No: AL-13-003

Supersedes

TN No: AL-91-36

Revision: HCFA-PM-92-1 (MB) AL-13-003 1991 ATTACHMENT 2.2-A

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### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

### COVERAGE AND CONDITIONS OF ELIGIBILITY

Citation(s) **Groups Covered** Mandatory Coverage - Categorically Needy and A. Other Required Special Groups (Continued) **DHR AMA ADPH** 12. Sec. 1902(e)(4) A child born to a woman who is eligible for and receiving Medicaid as categorically needy on the of the Act 42 USC § 1396a date of the child's birth. The child is deemed eligible for one year from birth as long as the mother remains eligible or would remain eligible if still pregnant and the child remains in the same household as the mother. **SSA** 42 CFR § 435.120 13. Aged, Blind and Disabled Individuals Receiving Cash Assistance |X|a. Individuals receiving SSI. This includes beneficiaries' eligible spouses and persons receiving SSI benefits pending a final determination of blindness or disability or pending disposal of excess resources under an agreement with the Social Security Administration; and beginning January 1, 1981 persons receiving SSI under section 1619(a) of the Act or considered to be receiving SSI under section 1619(b) of the Act. Aged Blind Disabled

TN No: AL-13-003

Supersedes

TN No: AL-91-36

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s)

**Groups Covered** 

A. <u>Mandatory Coverage - Categorically Needy and</u>
Other Required Special Groups (Continued)

AMA <u>ADPH</u>
<u>Sec.</u> 1634(c) of the Act
<u>42 USC § 1383c</u>
42 CFR 435, Subpart B

- 15. Except in States that apply more restrictive eligibility requirements for Medicaid than under SSI, blind or disabled individuals who-
  - a. Are at least 18 years of age;
  - b. Lose SSI eligibility because they become entitled to OASDI child's benefits under section 202(d) of the Act or an increase in these benefits based on their disability. Medicaid eligibility for these individuals continues for as long as they would be eligible for SSI, absent their OASDI eligibility.
- C. The State applies more restrictive eligibility requirements than those under SSI, and part or all of the amount of the OASDI benefit that caused SSI/SSP ineligibility and subsequent increases are deducted when determining the amount of count able income for categorically needy eligibility.
- d. The State applies more restrictive requirements than those under SSI, and none of the OASDI benefit is deducted in determining the amount of countable income for categorically needy eligibility.

DHR-AMA\_ADPH 42 CFR 435.122

16. Except in States that apply more restrictive eligibility requirements for Medicaid than under SSI, individuals who are ineligible for SSI or optional State supplements (if the agency provides Medicaid under §435.230), because of requirements that do not apply under title XIX of the Act.

TN No. AL-13-003 Supersedes TN No. AL-91-36

Approval Date: <u>6-24-13</u>

Effective Date: 04/01/13

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-91-4 (BPD) AL-13-003

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s) Groups Covered

A. <u>Mandatory Coverage - Categorically Needy and</u> Other Required Special Groups (Continued)

AMA\_ADPH 42 CFR 435.132

- 19. Institutionalized individuals who were eligible for Medicaid in December 1973 as inpatients of title XIX medical institutions or residents of title XIX intermediate care facilities, if, for each consecutive month after December 1973, they-
  - a. Continue to meet the December 1973 Medicaid State plan eligibility requirements; and
  - b. Remain institutionalized; and
  - c. Continue to need institutional care.

AMA <u>ADPH</u> 42 CFR 435.133

- 20. Blind and disabled individuals who-
  - a. Meet all current requirements for Medicaid eligibility except the blindness or disability criteria; and
  - b. Were eligible for Medicaid in December 1973 as blind or disabled; and
  - For each consecutive month after
     December 1973 continue to meet
     December 1973 eligibility criteria.

TN No: AL-13-003

Supersedes

TN No: AL-91-36

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-91-4 (BPD) AL-13-003

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s) Groups Covered Mandatory Coverage - Categorically Needy and A. Other Required Special Groups (Continued) 21. Individuals who would be SSI/SSP eligible DHR-AMA ADPH 42 CFR 435.134 except for the increase in OASDI benefits under Pub. L. 92-336 (July 1, 1972), who were entitled to OASDI in August 1972, and who were receiving cash assistance in August 1972. AMA/ ADPH Includes persons who would have been eligible for cash assistance but had not applied in August 1972 (this group was included in this State's August 1972 plan). XIncludes persons who would have been eligible for cash assistance in August 1972 if not in a medical institution or a nursing facility (this group was included in this State's August 1972 plan). Not applicable with respect to nursing facilities; the State did or does not cover this service.

TN No: AL-13-003

Supersedes

TN No: AL-91-36

<sup>\*</sup>Agency that determines eligibility for coverage.

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s) Groups Covered

A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued)

AMA DHR\_ADPH 42 CFR 435.135

- 22. Individuals who--
  - Are receiving OASDI and were receiving SSI/SSP but became ineligible for SSI/SSP after April 1977; and
  - b. Would still be eligible for SSI or SSP if cost-ofliving increases in OASDI paid under section 215(i) of the Act received after the last month for which the individual was eligible for and received SSI/SSP and OASDI, concurrently, were deducted from income.
    - Not applicable with respect to individuals receiving only SSP because the State either does not make such payments or does not provide Medicaid to SSP-only recipients.
    - Not applicable because the State applies more restrictive eligibility requirements than those under SSI.
    - The State applies more restrictive eligibility requirements than those under SSI and the amount of increase that caused SSI/SSP ineligibility and subsequent increases are deducted when determining the amount of countable income for categorically needy eligibility.

TN No: <u>AL-13-003</u>

Supersedes

TN No: AL-91-36

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s) Groups Covered

A. <u>Mandatory Coverage - Categorically Needy and</u>
Other Required Special Groups (Continued)

AMA DHR-ADPH 1634 of the Act 42 USC § 1383c 42 CFR 435.137 23. Disabled widows and widowers who would be eligible for SSI or SSP except for the increase in their OASDI benefits as a result of the elimination of the reduction factor required by section 134 of Pub. L. 98-21 and who are deemed, for purposes of title XIX, to be SSI beneficiaries or SSP beneficiaries for individuals who would be eligible for SSP only, under section 1634(b) of the Act.

Not applicable with respect to individuals
receiving only SSP because the State either does
not make these payments or does not provide
Medicaid to SSP-only recipients.

The State applies more restrictive eligibility standards than those under SSI and considers these individuals to have income equalling the SSI Federal benefit rate, or the SSP benefit rate for individuals who would be eligible for SSP only, when determining countable income for Medicaid categorically needy eligibility.

TN No: AL-13-003

TN No: <u>AL-91-36</u>

Supersedes Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

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OMB NO.: 0938-

Effective Date: 04/01/13

State: Alabama

Agency\* Citation(s) Groups Covered A. Mandatory Coverage - Categorically Needy and Other Required Special Groups (Continued) AMA DHR-ADPH 24. Disabled widows and widowers who would be 1634(d) of the eligible for SSI except for receipt of early social security disability benefits, Act who are not entitled to hospital insurance 42 USC § 1383c 42 CFR 435.138 under Medicare Part A and who are deemed, for purposes of title XIX, to be SSI beneficiaries under section 1634(d) of the Act.  $\Box$ Not applicable with respect to individuals receiving only SSP because the State either does not make these payments or does not provide Medicaid to SSP-only recipients.  $\square$ Not applicable because the State applies more restrictive eligibility than those under SSI and the State chooses not to deduct any of the benefit that caused SSI/SSP ineligibility or subsequent cost-of-living increases.  $\square$ The State applies more restrictive eligibility requirements than those under SSI and part or all of the amount of the benefit that caused SSI/SSP ineligibility and subsequent increases are deducted when determining the amount of countable income for categorically needy eligibility.

TN No: <u>AL-13-003</u>

Supersedes

TN No: AL-91-36

Approval Date: <u>6-24-13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-91-4 (BPD) AL-13-003

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OMB NO.: 0938-

State: Alabama

	Agency*	Citation(s)		Groups Covered
	AMA_ADPH			
,	OBRA 90, Sec. 5103, Sec. 1634 (d)(2) of the Act		24a.	Disabled widows and widowers and disabled surviving divorced spouses who would be eligible for SSI except for entitlement to an OASDI benefit resulting from a change in the
	42 USC § 1383	<u>c</u>		definition of disability, effective 1/1/91, and who are deemed, for the purposes of title XIX, to be SSI recipients under 1634 of the Act.

TN No: AL-13-003

Supersedes

TN No: <u>AL-91-36</u>

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

State: Alabama

Agency\* Citation(s) Groups Covered

# A. <u>Mandatory Coverage - Categorically Needy and</u> <u>Other Required Special Groups</u> (Continued)

### AMA ADPH

Sec. 1902(a)(10)(E)(i), Sec. 1905(p) and Sec. 1860D-14(a)(3)(D) of the Act 42 USC § 1383a 42 USC § 1396d 42 USC § 1395w-114 25. Qualified Medicare Beneficiaries –

- a. Who are entitled to hospital insurance benefits under Medicare Part A, (but not pursuant to an enrollment under section 1818A of the Act);
- b. Whose income does not exceed 100 percent of the Federal poverty level; and
- c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.

(Medical assistance for this group is limited to Medicare cost-sharing as defined in item 3.2 of this plan.)

#### AMA ADPH

Sec. 1902(a)(10)(E)(ii), Sec. 1905(p)(3)(A)(i), Sec. 1905(p) and 1860D-14(a)(3)(D) of the Act 42 USC § 1396a 42 USC § 1396d

42 USC § 1395w-114

- 26. Qualified Disabled and Working Individuals -
  - a. Who are entitled to hospital insurance benefits under Medicare Part A under section 1818A of the Act;
  - b. Whose income does not exceed 200 percent of the Federal poverty level; and
  - c. Whose resources do not exceed two times the SSI resource limit.
  - d. Who are not otherwise eligible for medical assistance under Title XIX of the Act.

(Medical assistance for this group is limited to Medicare Part A premiums under section 1818A of the Act.)

TN No: <u>AL-13-003</u> Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

Supersedes

TN No: <u>AL-10-007</u>

<sup>\*</sup>Agency that determines eligibility for coverage

State: Alabama

Agency\* Citation(s) Groups Covered

# A. <u>Mandatory Coverage - Categorically Needy and Other Required</u> Special Groups (Continued)

#### AMA ADPH

Sec. 1902(a)(10)(E)(iii), Sec. 1905(p)(3)(A)(ii), and Sec. 1860D-14(a)(3)(D) of the Act 42 USC § 1396a 42 USC § 1396d

42 USC § 1395w-114

27. Specified Low-Income Medicare Beneficiaries --

- a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act);
- b. whose income is greater than 100 percent but less than 120 percent of the Federal poverty level; and
- c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.

(Medical assistance for this group is limited to Medicare Part B premiums under section 1839 of the Act.)

# AMA ADPH

Sec. 1902(a)(10)(E)(iv) and Sec. 1905(p)(3)(A)(ii) and Sec. 1860D-14(a)(3)(D) of the Act 42 USC § 1396a 42 USC § 1396d 42 USC § 1395w-114 28. Qualifying Individuals --

- a. Who are entitled to hospital insurance benefits under Medicare Part A (but not pursuant to an enrollment under section 1818A of the Act);
- b. whose income is at least 120 percent but less than 135 percent of the Federal poverty level;
- c. Whose resources do not exceed three times the SSI resource limit, adjusted annually by the increase in the consumer price index.

TN No: <u>AL-13-003</u> Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

Supersedes

TN No: AL-10-007

<sup>\*</sup> Agency that determines eligibility for coverage.

State: Alabama

Agency\* Citation(s) Groups Covered

A. <u>Mandatory Coverage - Categorically Needy and Other Required Special Groups</u> (Continued)

AMA <u>ADPH</u> Sec. 1634 (e) 42 USC § 1383c

29. Each person to whom SSI benefits by reason of disability are not payable for any month solely by reason of clause (i) of (v) of Section 1611 (e) (3) (A) shall be treated, for purposes of Title XIX, as receiving benefits for the month.

TN No: <u>AL-13-003</u> Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

Supersedes

TN No: AL-10-007

<sup>\*</sup> Agency that determines eligibility for coverage.

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OMB NO.: 0938-

Agency*	Citation(s)	Groups Covered			
	В.	Optional Groups Other Than the Medically Needy			
42 CFR 435.210 1.  Sec. 1902(a)(10) (10)(A)(ii) and the Act 42 USC § 1396a		Individuals described below who meet the income and resource requirements of AFDC, SSI, or an optional State supplement as specified in 42CFR 435.230, but who do 1905(a) of not receive cash assistance.			
		☐ The plan covers all individuals as described above.			
		☐ The plan covers only the following group or groups of individuals:			
		Aged Blind Disabled Caretaker relatives Pregnant women Individuals under the age of			
		18 19 20 21			
AMA <u>ADPF</u> 42 CFR 435.211	<u>I</u>	Individuals who would be eligible for AFDC, SSI, or an optional State supplement as specified in 42 CFR 435.230, if they were not in a medical institution.			

TN No: <u>AL-13-003</u>

Supersedes

TN No: <u>AL-91-36</u>

Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

Revision: HCFA-PM-10 (MB)

December 1991

AL-13-003 ATTACHMENT 2.2-A Page 10

State: Alabama

Agency\* Citation(s) Groups Covered B. Optional Groups Other Than the Medically Needy (Continued) **DHR AMA ADPH** 42 CFR 435.212 & The State deems as eligible those individuals who became 3. Sec. 1902(e)(2) of the otherwise ineligible for Medicaid while enrolled in an HMO qualified under Title XIII of the Public Health Service Act Act, P.L. 99-272 or a managed care organization (MCO), or primary care (section 9517) P.L. case management (PCCM) program but who have been 101-508 (section enrolled in the entity for less than the minimum enrollment 4732) 42 USC § 1396a period listed below. Coverage under this section is limited to MCO or PCCM services and family planning services 42 USC § 1396n 42 CFR 435.211 described in Section 1905(a)(4)(C). The State elects not to guarantee eligibility. The State elects not to guarantee eligibility. The  $\mathbf{X}$ minimum enrollment period is Six months (not to exceed six). The State measures the minimum enrollment period The date beginning the period of enrollment in the MCO or PCCM, without any intervening disenrollment, regardless of Medicaid eligibility. The date beginning the period of enrollment in the MCO or PCCM as a Medicaid patient (including periods when payment is made under this section), without any intervening disenrollment. The date beginning the last period of enrollment in the MCO or PCCM as a Medicaid patient (not including periods when payment is made under this section), without any intervening disenrollment of periods of enrollment as a privately paying patient. (A new minimum enrollment period begins each time the individual becomes Medicaid eligible other than under this section.)

TN No: AL-13-003

\*Agency that determines eligibility for coverage.

Supersedes

TN No: AL-03-07

December 1991

AL-13-003 ATTACHMENT 2.2-A

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State: Alabama

Agency\* Citation(s) Groups Covered

DHR AMA ADPH Sec. 1932(a)(4) of the Act 42 USC § 1396u-2

# B. Optional Groups Other Than Medically Needy

The Medicaid Agency may elect to restrict the disenrollment of Medicaid enrollees of MCOs, PIHPs, PAHPs, and PCCMs in accordance with the regulations at 42 CFR 438.56. This requirement applies unless a recipient can demonstrate good cause for disenrolling or if he/she moves out of the entity's service area or becomes ineligible.

\_\_\_\_ Disenrollment rights are restricted for a period of \_\_\_\_\_ months (not to exceed 12 months).

During the first three months of each enrollment period the recipient may disenroll without cause. The State will provide notification, at least once per year, to recipients enrolled with such organization of their right to and restrictions of terminating such enrollment.

X No restrictions upon disenrollment rights.

Sec. 1903(m)(2)(H), Sec. 1902(a)(52) of the Act P.L. 101-508 42 CFR 438.56(g) 42 USC § 1396a 42 USC § 1396b In the case of individuals who have become ineligible for Medicaid for the brief period described in section 1903(m)(2)(H) and who were enrolled with an MCO, PIHP, PAHP, or PCCM when they became ineligible, the Medicaid agency may elect to reenroll those individuals in the same entity if that entity still has a contract.

The agency elects to reenroll the above individuals who are eligible in a month but in the succeeding two months become eligible, into the same entity in which they were enrolled at the time eligibility was lost.

Effective Date: 04/01/13

\_\_\_\_ The agency elects not to reenroll above individuals into the same entity in which they were previously enrolled.

Approval Date: 6-24-13

TN No: <u>AL-13-003</u>

Supersedes

TN No: AL-03-07

Revision: HCFA-PM-91-4 (BPD) AL-13-003 1991 ATTACHMENT 2.2-A Page 11 OMB NO.: 0938-State: Alabama Agency\* Citation(s) Groups Covered B. Optional Groups Other Than the Medically Needy (Continued)  $\Box$ The date beginning the last period of enrollment in the HMO as a Medicaid patient (not including periods when payment is made under this section), without any intervening disenrollment or periods of enrollment as a privately paying patient. (A new minimum enrollment period begins each time the individual becomes Medicaid eligible other than under this section). AMA ADPH |X|42 CFR Part 441 4. A group or groups of individuals who would be eligible for Medicaid 435.217 under the plan if they were in a 42 USC 1396n NF or an ICF/MR, who but for the provision of home and community-based services under a waiver granted under 42 CFR Part 441, Subpart G would require institutionalization, and who will receive home and community-based services under the waiver. The group or groups covered are listed in the waiver request. This option is effective date of the State's section 1915(c) waiver under which this group(s) is covered. In the event an existing 1915(c) waiver is amended to cover this group(s), this option is effective on the effective date

AMA ADPH
42 CFR Part 460

5. PACE enrollees.

of the amendment.

TN No: AL-13-003

Supersedes Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

<sup>\*</sup>Agency that determines eligibility for coverage.

TN No: <u>AL-10-019</u> Revision: HCFA-PM-91-4 1991	(BPD)	AL-03-05 ATTACHMENT 2.2-A Page 12 OMB NO.: 0938-
State: Alab	<u>oama</u>	
Agency* Citation(s)		Groups Covered
В.	<u>Option</u>	al Groups Other Than the Medically Needy (Continued)
42 CFR 435.220	6.	Individuals who would be eligible for AFDC if their work-related child care costs were paid from earnings rather than by a State agency as a service expenditure. The State's AFDC plan deducts work-related child care costs from income to determine the amount of AFDC.
	Ĺ	The State covers all individuals as described above.
Sec. 1902(a)(10)(A) (ii) and Sec. 1905(a) of the Act	L	The State covers only the following group or groups of individuals:
of the Act		Individuals under the age of
DHR AMA ADPH 42 CFR 435.222 Sec. 1902(a)(10)(A)(ii)(I) Sec. 1905(a)(i) of	<b>⊠</b> 7.	a. All individuals who are not described in section 1902(a)(10)(A)(i) of the Act, who meet the income and resource requirements of the AFDC State Plan, and who are under

the age of:

TN No: <u>AL-13-003</u>

Supersedes Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

TN No: <u>AL-03-05</u>

the Act

42 USC § 1396a 42 USC § 1396d Revision: HCFA-PM-91-4 (BPD) AL-13-003

1991

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OMB NO.: 0938-

State: Alabama

Agency\* Citation(s) **Groups Covered** 

> B. Optional Groups Other Than the Medically Needy (Continued)

> > Individuals receiving active treatment as \_\_(5) inpatients in psychiatric facilities or programs (who are under the age of \_\_\_). Inpatient psychiatric services for individuals under age 21 are provided under this plan.

DHR AMA ADPH

42 CFR 435.222

 $\underline{X}$  (6) Other defined groups (and ages), as specified in Supplement 1 of ATTACHMENT 2.2-A.

TN No: AL-13-003

Supersedes

TN No: <u>AL-91-36</u>

Revision: HCFA-PM-91-4 (BPD) AL-13-003

1991

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OMB NO.: 0938-

State: Alabama

|X|

Agency\* Citation(s) Groups Covered

B. Optional Groups Other Than the Medically Needy (Continued)

DHR 1902(a)(10) (A)(ii)(VIII) of the Act 42 USC § 1396a 42 CFR 435.145

8. A child for whom there is in effect a
State adoption assistance agreement
(other than under title IV-E of the Act),
who, as determined by the State adoption
agency, cannot be placed for adoption
without medical assistance because the
child has special needs for medical or
rehabilitative care, and who before
execution of the agreement--

- a. Was eligible for Medicaid under the State's approved Medicaid plan; or
- b. Would have been eligible for Medicaid if the standards and methodologies of the title IV-E foster care program were applied rather than the AFDC standards and methodologies.

The State covers individuals under the age of-

\_\_\_21 20

 $\overline{X}$  19 or under age 21 who are full

18 time students in a secondary school or in the equivalent level of vocational or technical training.

TN No: AL-13-003

TN No: <u>AL-91-36</u>

Supersedes Approval Date: <u>6-24-13</u> Effective Date: <u>04/01/13</u>

	A-PM-91-4 1991 State: <u>Alaban</u>	(BPD)	AL-13-003 ATTACHMENT 2.2-A Page 19 OMB NO.: 0938-
Agency*	Citation(s)	-	Groups Covered
AMA ADPH	В.	_	roups Other Than the Medically Needy (Continued)
42 CFR 435.236 <u>Sec.</u> 1902(a)(10) (A)(ii)(V) of the Act <u>42 USC 1396a</u>		<b>⊠</b> 12.	Individuals who are in institutions for least 30 consecutive days and who are eligible under a special income level Eligibility begins on the first day of the 30-day period. These individuals meet the income standards specified in Supplement 1, page 9a. to <u>ATTACHMENT 2.6-A</u> .
			The State covers all individuals as described above.
AMA ADPH		$\boxtimes$	The State covers only the following group or groups of individuals:
Sec. 1902(a)(10) (ii) and 1905(a) of the Act 42 USC 1396a	)(A)		X Aged X Blind X Disabled Individuals under the age of 21 20 19 18 Caretaker relatives Pregnant women

TN No: AL-13-003 Supersedes TN No: AL-91-36 Effective Date: <u>04/01/13</u> Approval Date: 6-24-13

Revision: HCFA-PM-91-8 AL-13-003

1991

ATTACHMENT 2.2-A

Page 23b OMB NO.: 0938

State: Alabama

Citation

### **Groups Covered**

B. Optional Coverage Other Than the Medically Needy (Continued)

DHR AMA ADPH 1902 (a)(10)(A)

(ii)(XIV)of the

Act 42 USC 1396a 42 CFR 435.229 X 20. Optional Targeted Low Income Children who

- are not eligible for Medicaid under any a. other optional or mandatory eligibility group or eligible as medically needy (without spend down liability);
- b. would not be eligible for Medicaid under the policies in the State's Medicaid plan as in effect on April 15, 1997 (other than because of the age expansion provided for in 1902(1)(2)(D);
- c. are not covered under a group health plan or other group health insurance (as such terms are defined in 2791 of the Public Health Service Act coverage) other than under a health insurance program in operation before July 1, 1997 offered by a State which receives no Federal funds for the program;
- d. have family income at or below; 200 percent of the Federal poverty level for the size family involved, as revised annually in the Federal Register; or

A percentage of the Federal poverty level, which is in excess of the "Medicaid applicable income level" (as defined in 2110(b)(4) of the Act) but by no more than 50 percentage points.

The State covers:

X All children described above who are under age 19 (18,19) with family income at or below 100 percent of the Federal

poverty level.

TN No: AL-13-003

Supersedes

TN No: AL-97-10

Revision: HCDA-PM-91-8 (BPD) AL-13-003

ATTACHMENT 2.2-A

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OMB NO.: 0938-

State/Territory: Alabama

Citation(s)

**Groups Covered** 

EXPLANATION OF THE METHODOLOGIES USED TO ESTABLISH COUNTABLE INCOME AND RESOURCES

<u>DHR AMA ADPH</u> <u>Sec.</u> 1902 (E) of the Act <u>X</u> 20. 42 USC 1396a

A child under age 19 (not to exceed age 19) who has been determined eligible is deemed to be eligible for a total of 12 months (not to exceed 12 months) regardless of changes in circumstances other than attainment of the maximum age stated above.

<u>Sec.</u> 1920A of the Act \_\_\_21. 42 USC 1396r-1

Children under age 19 who are determined by a "qualified entity" (as defined in 1920A(b)(3)(A) based preliminary information, to meet the highest applicable income criteria specified in this plan as applicable to children.

The presumptive period begins on the day that the determination is made. If an application for Medicaid is filed on the child's behalf by the last day of the month following the month in which the determination of presumptive eligibility was made, the presumptive period ends on the day that the State agency makes a determination of eligibility based on that application. If an application is not filed on the child's behalf by the last day of the month following the month the determination of presumptive eligibility was made, the presumptive period ends on that last day.

Effective Date: 04/01/13

Approval Date: 6-24-13

TN No: AL-13-003

Supersedes

TN No: AL-98-02

#### STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State: Alabama

# REQUIREMENTS RELATING TO DETERMINING ELIGIBILITY FOR MEDICARE PRESCRIPTION DRUG LOW-INCOME SUBSIDIES

Agency Citation(s) Groups Covered

### **AMA ADPH**

Sec. 1935(a) and 1902(a)(66) 42 CFR 423.774 and 423.904

42 USC 1396a 42 USC 1396u-5 The agency provides for making Medicare prescription drug Low Income Subsidy determinations under Section 1935(a) of the Social Security Act.

- 1. The agency makes determinations of eligibility for premium and cost-sharing subsidies under and in accordance with section 1860D-14 of the Social Security Act;
- 2. The agency provides for informing the Secretary of such determinations in cases in which such eligibility is established or redetermined;
- 3. The agency provides for screening of individuals for Medicare cost-sharing described in Section 1905(p)(3) of the Act and offering enrollment to eligible individuals under the State plan or under a waiver of the State plan.

TN No: AL-13-003 Approval Date: 6-24-13 Effective Date: 04/01/13

Supersedes

TN No: AL-05-03