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State/Territory Name: Georgia

State Plan Amendment (SPA) #:13-0024-MM6

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Superseding Pages Notice
- 4) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Atlanta Regional Office 61 Forsyth Street, Suite 4T20 Atlanta, Georgia 30303



DIVISION OF MEDICAID & CHILDREN'S HEALTH OPERATIONS

February 18, 2014

Dr. Jerry Dubberly, Chief Medical Assistance Plans Georgia Department of Community Health 2 Peachtree Street, NW, 40th Floor Atlanta, Georgia 30303

RE: Title XIX State Plan Amendment (SPA), GA 13-0024-MM6

Dear Dr. Dubberly:

Enclosed is an approved copy of Georgia's state plan amendment (SPA) 13-0024-MM6, which was submitted to CMS on November 18, 2013. SPA 13-0024-MM6 affirms citizenship regulations, specifies reasonable opportunity options, and specifies policy options related to immigrant eligibility in accordance with the Affordable Care Act. This SPA was approved on February 12, 2014. The effective date of the SPA is January 1, 2014.

Enclosed is a copy of the new state plan pages and attachments to be incorporated within a separate section at the back of Georgia's approved state plan, as well as a summary of the state plan pages which are superseded by SPA 13-0024-MM6, which should be incorporated into a separate section in the front of the state plan.

Congratulations to you and your staff for your hard work and strong collaboration. If you have any additional questions or need further assistance, please contact Tandra Hodges at (404) 562-7409 or <u>Tandra.Hodges@cms.hhs.gov</u>.

Sincerely,

//s//

Jackie Glaze Associate Regional Administrator Division of Medicaid & Children's Health Operations

Enclosures

Medicaid State Plan Eligibility: Summary Page (CMS 179)

• State/Territory name:

Georgia

Transmittal Number:

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

GA13-024

Proposed Effective Date

01/01/2014 (mm/dd/yyyy)

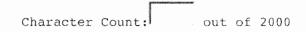
Federal Statute/Regulation Citation

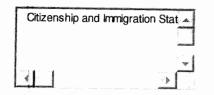
42 C.F.R. §

Federal Budget Impact

	Federal Fiscal Year	Amount
First Year	2014	\$ 0.00
Second Year	2015	\$ 0.00

Subject of Amendment

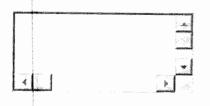




Governor's Office Review

- Governor's office reported no comment 0
- Comments of Governor's office received Cο

Describe:

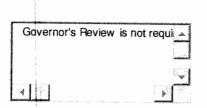


No reply received within 45 days of submittal C о



Other, as specified

Describe:



Character Count: out of 2000

Signature of State Agency Official •

Submitted By: 0

Therese Brisco

Last Revision Date: 0

Feb 6, 2014

Submit Date:Nov 18, 2013 о

SUPERSEDING PAGES OF STATE PLAN MATERIAL					
TRANSMITTAL NUMBER:	STATE:				
13-024	Georgia				
PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):				
S89 Non-Financial Eligibility- Citizenship and Non-citizen Eligibility	Attachment 2.6-A: Page 2, item (3), paragraphs (a), (b), and (c), TN 91-31 Attachment 2.6-A: Page 3, item (3), paragraphs (d) and (e), TN 91-31				



Medicaid Eligibility

OMB Control Number 0938-1148 OMB Expiration date: 10/31/2014

Non-Financial Eligibility Citizenship and Non-Citizen Eligibility				
1902(a)(46)(B) 8 U.S.C. 1611, 1612, 1613, and 1641 1903(v)(2),(3) and (4) 42 CFR 435.4 42 CFR 435.406 42 CFR 435.956				
Citizenship and Non-Citizen Eligibility				
The state provides Medicaid to citizens and n CFR 435.406, including during a reasonable satisfactory immigration status.		ain non-citizens consistent with requirements of 42 on of their citizenship, national status or		
The state provides Medicaid eligibility to	o otherwise eligible individuals:			
Who are citizens or nationals of the	United States; and			
Reconciliation Act (PRWORA) (8 U		Responsibility and Work Opportunity required by section 402(b) of PRWORA (8 U.S.C. 613); and		
immigration status, during a reasonal	ble opportunity period pending verific	ates, or an individual having satisfactory cation of their citizenship, nationality or 137(d), 1902(ee) of the SSA and 42 CFR 435.406,		
The reasonable opportunity period b received by the individual.	begins on and extends 90 days from the	ne date the notice of reasonable opportunity is		
0 11		d if the individual is making a good faith effort to e agency needs more time to complete the		
• Yes C No				
The agency begins to furnish benefit earlier than the date the notice is rec		ring the reasonable opportunity period on a date		
(• Yes (No				
The date benefits are furnished	is:			
• The date of application	• The date of application containing the declaration of citizenship or immigration status.			
C The date the reasonable opportunity notice is sent.				
C Other date, as described	:			
TN No. 13-0024-MM6 Georgia	Approval Date: 02-12-14 S89-1	Effective Date: 01-01-14		



Medicaid Eligibility

	The state provides Medicaid coverage to all Qualified Non-Citizens whose eligibility is not prohibited by section 403 of PRWORA (8 U.S.C. §1613).				
•	Yes (No				
	The state elects the option to provide Medicaid coverage to otherwise eligible individuals under 21 and pregnant women, lawfully residing in the United States, as provided in section 1903(v)(4) of the Act.				
C	Yes (• No				
	An individual is considered to be lawfully residing in the United States if he or she is lawfully present and otherwise meets the eligibility requirements in the state plan.				
	An individual is considered to be lawfully present in the United States if he or she:				
	1. Is a qualified non-citizen as defined in 8 U.S.C. 1641(b) and (c);				
	2. Is a non-citizen in a valid nonimmigrant status, as defined in 8 U.S.C. 1101(a)(15) or otherwise under the immigration laws (as defined in 8 U.S.C. 1101(a)(17));				
	3. Is a non-citizen who has been paroled into the United States in accordance with 8 U.S.C. 1182(d)(5) for less than 1 year, except for an individual paroled for prosecution, for deferred inspection or pending removal proceedings;				
	4. Is a non-citizen who belongs to one of the following classes:				
	Granted temporary resident status in accordance with 8 U.S.C. 1160 or 1255a, respectively;				
	Granted Temporary Protected Status (TPS) in accordance with 8 U.S.C. §1254a, and individuals with pending applications for TPS who have been granted employment authorization;				
	Granted employment authorization under 8 CFR 274a.12(c);				
	Family Unity beneficiaries in accordance with section 301 of Pub. L. 101-649, as amended;				
	Under Deferred Enforced Departure (DED) in accordance with a decision made by the President;			cision made by the President;	
	[Granted Deferred Action sta	tus;		
	[Granted an administrative st	ay of removal under 8 CFR 241;		
	Beneficiary of approved visa petition who has a pending application for adjustment of status;				
	5. Is an individual with a pending application for asylum under 8 U.S.C. 1158, or for withholding of removal under 8 U.S.C.1231, or under the Convention Against Torture who -				
	Has been granted employment authorization; or				
	Is under the age of 14 and has had an application pending for at least 180 days;				
	6. Ha	as been granted withholding of re	emoval under the Convention Against T	orture;	
	7. Is a child who has a pending application for Special Immigrant Juvenile status as described in 8 U.S.C. 1101(a)(27)(J);				
	8. Is lawfully present in American Samoa under the immigration laws of American Samoa; or				
	9. Is a victim of severe trafficking in persons, in accordance with the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. 106-386, as amended (22 U.S.C. 7105(b));				
	TN N	o. 13-0024-MM6	Approval Date: 02-12-14	Effective Date: 01-01-14	

S89-2



Medicaid Eligibility

10. <u>Exception</u>: An individual with deferred action under the Department of Homeland Security's deferred action for the childhood arrivals process, as described in the Secretary of Homeland Security's June 15, 2012 memorandum, shall not be considered to be lawfully present with respect to any of the above categories in paragraphs (1) through (9) of this definition.

Other

The state assures that it provides limited Medicaid services for treatment of an emergency medical condition, not related to an organ transplant procedure, as defined in 1903(v)(3) of the SSA and implemented at 42 CFR 440.255, to the following individuals who meet all Medicaid eligibility requirements, except documentation of citizenship or satisfactory immigration status and/or present an SSN:

Qualified non-citizens subject to the 5 year waiting period described in 8 U.S.C. 1613;

Non-qualified non-citizens, unless covered as a lawfully residing child or pregnant woman by the state under the option in accordance with 1903(v)(4) and implemented at 435.406(b).

PRA Disclosure Statement

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 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, 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.