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**State/Territory Name: NE**

**State Plan Amendment (SPA) #: 15-0006-MM1**

This file contains the following documents in the order listed:

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

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
601 East 12<sup>th</sup> Street, Suite 355  
Kansas City, Missouri 64106



**Division of Medicaid and Children's Health Operations**

October 9, 2015

Calder Lynch, Director  
Department of Health & Human Services  
Division of Medicaid and Long Term Care  
301 Centennial Mall S., 5th Floor  
PO Box 95026  
Lincoln, Nebraska 68509

Dear Mr. Lynch:

On August 5, 2015, the Centers for Medicare & Medicaid Services (CMS) received Nebraska's State Plan Amendment (SPA) transmittal #15-0006-MM1 of Section S52 which proposed to provide coverage for qualified youth age 19 but less than 21 who entered into a kinship guardianship assistance agreement, an adoption assistance agreement, or a state-funded guardianship assistance agreement after turning age 16, who also meet at least one of several work or school requirements, using the state's AFDC payment standards as of 7/16/1996 for the income limit. This SPA replaces the S52 as approved in SPA 13-0027.

SPA 15-0005 was approved on October 7, 2015, as revised and submitted via mmdl on September 28, 2015 with an effective date of July 1, 2015, as requested. Enclosed is a copy of the CMS-179 summary form, as well as the approved pages for incorporation into the Nebraska State Plan.

If you have any questions regarding this amendment, please contact Barbara Cotterman at 816-426-5925.

Sincerely,

//s//

Leticia Barraza  
Acting Associate Regional Administrator  
for Medicaid and Children's Health Operations

## Medicaid State Plan Eligibility: Summary Page (CMS 179)

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**State/Territory name:** Nebraska

**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.*

NE-15-0006

**Proposed Effective Date**

07/01/2015

(mm/dd/yyyy)

**Federal Statute/Regulation Citation**

42 CFR 435.222

**Federal Budget Impact**

	Federal Fiscal Year	Amount
First Year	2015	\$ 2721.00
Second Year	2016	\$ 12087.00

**Subject of Amendment**

Additional Reasonable Classification Group added.

**Governor's Office Review**

Governor's office reported no comment

Comments of Governor's office received

Describe:

No reply received within 45 days of submittal

Other, as specified

Describe:

**Signature of State Agency Official**

Submitted By:

Crystal Georgiana

Last Revision Date:

Aug 14, 2015

Submit Date:

Aug 5, 2015



# Medicaid Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: NE - 15 - 0006

Expiration date: 10/31/2014

## Eligibility Groups - Options for Coverage

S52

### Reasonable Classification of Individuals under Age 21

42 CFR 435.222  
1902(a)(10)(A)(ii)(I)  
1902(a)(10)(A)(ii)(IV)

**Reasonable Classification of Individuals under Age 21** - The state elects to cover one or more reasonable classifications of individuals under age 21 who are not mandatorily eligible and who have income at or below a standard established by the state and in accordance with provisions described at 42 CFR 435.222.

Yes  No

The state attests that it operates this eligibility group in accordance with the following provisions:

- Individuals qualifying under this eligibility group must qualify under a reasonable classification by meeting the following criteria:
  - Be under age 21, or a lower age, as defined within the reasonable classification.
  - Have household income at or below the standard established by the state, if the state has an income standard for the reasonable classification.
  - Not be eligible and enrolled for mandatory coverage under the state plan.
- MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

The state covered at least one reasonable classification under this eligibility group under its Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013, with income standards higher (including disregarding all income) than the current mandatory income standards for the individual's age.

Yes  No

The state also covered at least one reasonable classification under this group in the Medicaid state plan as of March 23, 2010 with income standards higher (including disregarding all income) than the current mandatory income standards for the individual's age.

Yes  No



# Medicaid Eligibility

## Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010

- The state attaches the approved pages from the Medicaid state plan as of March 23, 2010 to indicate the age groups, reasonable classifications, and income standards used at that time for this eligibility group.

**An attachment is submitted.**

## Current Coverage of All Children under a Specified Age

The state covers all children under a specified age limit, equal to or higher than the age limit and/or income standard used in the Medicaid state plan as of March 23, 2010, provided the income standard is higher than the current mandatory income standard for the individual's age. The age limit and/or income standard used must be no higher than any age limit and/or income standard covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income.

- Yes     No

## Current Coverage of Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010

The state covers reasonable classifications of children previously covered in the Medicaid state plan as of March 23, 2010, with income standards higher than the current mandatory income standard for the age group. Age limits and income standards are equal to or higher than the Medicaid state plan as of March 23, 2010, but no higher than any age limit and/or income standard for this classification covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income.

- Yes     No

Indicate the reasonable classifications of children that were covered in the state plan in effect as of March 23, 2010 with income standards higher than the mandatory standards used for the child's age, using age limits and income standards that are not more restrictive than used in the state plan as of as March 23, 2010 and are not less restrictive than used in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

## Current Coverage of Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010

<b>Reasonable Classifications of Children</b>	<b>S11</b>
<input type="checkbox"/> Individuals for whom public agencies are assuming full or partial financial responsibility.	
<input type="checkbox"/> Individuals in adoptions subsidized in full or part by a public agency	
<input type="checkbox"/> Individuals in nursing facilities, if nursing facility services are provided under this plan	
<input checked="" type="checkbox"/> Individuals receiving active treatment as inpatients in psychiatric facilities or programs, if such services are provided under this plan	
Indicate the age which applies:	
<input checked="" type="radio"/> Under age 21 <input type="radio"/> Under age 20 <input type="radio"/> Under age 19 <input type="radio"/> Under age 18	



# Medicaid Eligibility

Other reasonable classifications

	Name of classification	Description	Age Limit	
+	Former Wards	The program provides assistance, including maintenance payments and Medicaid, to former wards of the Department who are age 18 through 20 and are regularly attending a school, college, or a course of vocational or technical training designed to prepare the youth for gainful employment.	Under age 21	X

Enter the income standard used for these classifications. The income standard must be higher than the mandatory standard for the child's age. It may be no lower than the income standard used in the state plan as of March 23, 2010 and no higher than the highest standard used in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

[Click here once S11 form above is complete to view the income standards form.](#)

## Individuals receiving active treatment as inpatients in psychiatric facilities or programs, if such services are provided under this plan

Income standard used

Minimum income standard

The minimum income standard for this classification of children is the AFDC payment standard in effect as of July 16, 1996, not converted to MAGI-equivalent. This standard is described in S14 AFDC Income Standards.

Maximum income standard

No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

Yes  No

The state certifies that it has submitted and received approval for its converted income standards for this classification of children to MAGI-equivalent standards and the determination of the maximum income standard to be used for this classification of children under this eligibility group.

**An attachment is submitted.**

The state's maximum income standard for this classification of children (which must exceed the minimum for the classification) is:

The state's effective income level for this classification of children under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.



# Medicaid Eligibility

The state's effective income level for this classification of children under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Enter the amount of the maximum income standard:

A percentage of the federal poverty level:  %

The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

Other dollar amount

## Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

Enter the statewide standard

	Household size	Standard (\$)	
<b>+</b>	1	492	<b>X</b>
<b>+</b>	2	527	<b>X</b>
<b>+</b>	3	661	<b>X</b>
<b>+</b>	4	788	<b>X</b>



# Medicaid Eligibility

<b>+</b>	5	914	<b>X</b>
<b>+</b>	6	1,048	<b>X</b>
<b>+</b>	7	1,175	<b>X</b>

Additional incremental amount

Yes  No

Increment amount \$

The dollar amounts increase automatically each year

Yes  No

**Income standard chosen**

Individuals qualify under this classification under the following income standard:

- The minimum standard
- The maximum income standard

If not chosen as the maximum income standard, the state's effective income level for this classification under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Another income standard in-between the minimum and maximum standards allowed, provided it is higher than the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.

## Former Wards

**Income standard used**

**Minimum income standard**





# Medicaid Eligibility

The minimum income standard for this classification of children is the AFDC payment standard in effect as of July 16, 1996, not converted to MAGI-equivalent. This standard is described in S14 AFDC Income Standards.

Maximum income standard

No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

Yes  No

The state certifies that it has submitted and received approval for its converted income standards for this classification of children to MAGI-equivalent standards and the determination of the maximum income standard to be used for this classification of children under this eligibility group.

**An attachment is submitted.**

The state's maximum income standard for this classification of children (which must exceed the minimum for the classification) is:

- The state's effective income level for this classification of children under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Enter the amount of the maximum income standard:



# Medicaid Eligibility

A percentage of the federal poverty level:  %

The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

Other dollar amount

**Income Standard Entry - Dollar Amount - Automatic Increase Option** S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

Enter the statewide standard

	Household size	Standard (\$)	
+	1	492	X
+	2	527	X
+	3	661	X
+	4	788	X
+	5	914	X
+	6	1,048	X
+	7	1,175	X

Additional incremental amount

Yes  No

Increment amount \$

The dollar amounts increase automatically each year

Yes  No

Income standard chosen

Individuals qualify under this classification under the following income standard:



# Medicaid Eligibility

- The minimum standard
- The maximum income standard

If not chosen as the maximum income standard, the state's effective income level for this classification under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Another income standard in-between the minimum and maximum standards allowed, provided it is higher than the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.

## Other Reasonable Classifications Previously Covered

The state covers reasonable classifications of children not covered in the Medicaid state plan as of March 23, 2010, but covered under the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013 with an income standard higher than the current mandatory income standard for the age group.

- Yes    No

## Additional new age groups or reasonable classifications covered

If the state has not elected to cover the Adult Group (42 CFR 435.119), it may elect to cover additional new age groups or reasonable classifications that have not been covered previously. If the state covers the Adult Group, this additional option is not available, as the standard for the new age groups or classifications is lower than that used for mandatory coverage.

The state does not cover the Adult Group and elects the option to include in this eligibility group additional age groups or reasonable classifications that have not been covered previously in the state plan or under a Medicaid 1115 Demonstration. Any additional age groups or reasonable classifications not previously covered are restricted to the AFDC income standard from July 16, 1996, not converted to a MAGI-equivalent standard.

- Yes    No

The state covers all children within a specified age group, higher than any age limit already included above.

- Yes    No



# Medicaid Eligibility

Indicate the reasonable classifications of children that were not previously covered.

New Reasonable Classifications

**Reasonable Classifications of Children** **S11a**

- Individuals for whom public agencies are assuming full or partial financial responsibility.
- Individuals in adoptions subsidized in full or part by a public agency
- Individuals in nursing facilities, if nursing facility services are provided under this plan
- Individuals receiving active treatment as inpatients in psychiatric facilities or programs, if such services are provided under this plan
- Other reasonable classifications

	Name of classification	Description	Age Limit	
+	Non IV-E Subsidized Adoptions and Guardianships	The program provides medical assistance to young adult who are at least 19 years of age but less than 21, with respect to whom a kinship guardianship assistance agreement, an adoption assistance agreement, or a state-funded guardianship assistance agreement was in effect if the young adult had attained 16 years of age before the agreement became effective, and who meets at least one of the following conditions of eligibility: 1. The young adult is completing secondary education or an educational program leading to an equivalent credential; 2. The young adult is enrolled in an institution that provides post secondary or vocational education; 3. The young adult is employed for at least 80 hours per month; 4. The young adult is participating in a program or activity designed to promote employment or remove barriers to employment; or 5. The young adult is incapable of doing any part of the above listed activities due to a medical condition.	Both age 19 and 20	X

Income standard used



# Medicaid Eligibility

The state's income standard for each age group and reasonable classification not previously covered is the AFDC payment standard in effect as of July 16, 1996, not converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards.

- There is no resource test for this eligibility group.

## 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.

V.20140415