

APA-1

TRANSMITTAL SHEET FOR
NOTICE OF INTENDED ACTION

Control No: 560 Department or Agency: Alabama Medicaid Agency

Rule No: 560-X-25-.15

Rule Title: Parents and Other Caretaker Relatives, Extended Medicaid Benefits due to Spousal Support, and Transitional Medicaid Benefits

_____ New Rule; X Amend; _____ Repeal; _____ Adoption by Reference

Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety? _____ no

Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare? _____ yes

Is there another, less restrictive method of regulation available that could adequately protect the public? _____ no

Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree? _____ no

Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule? _____ no

Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public? _____ yes

Does the proposed rule have any economic impact? _____ no

If the proposed rule has an economic impact, the proposed rule is required to be accompanied by a fiscal note prepared in accordance with subsection (f) of Section 41-22-23, Code of Alabama 1975.

Certification of Authorized Official

I certify that the attached proposed rule has been proposed in full compliance with the requirements of Chapter 22, Title 41, Code of Alabama 1975 and that it conforms to all applicable filing requirements of the Administrative Procedure Division of the Legislative Reference Service.

Signature of certifying officer: Stephanie Lindsay

Date: 4/20/15

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ALABAMA MEDICAID AGENCY

NOTICE OF INTENDED ACTION

RULE NO. & TITLE: 560-X-25-.15 Parents and Other Caretaker Relatives, Extended Medicaid Benefits Due to Spousal Support, and Transitional Medicaid Benefits.

INTENDED ACTION: Amend 560-X-25-.15

SUBSTANCE OF PROPOSED ACTION: The above referenced rule is being amended to delete the Parents and Other Caretaker Relatives Income Chart due to the eligibility standards are no longer stagnate and will change each calendar year. Also, the rule is being amended to extend families' Medicaid eligibility under Transitional Medical Assistance (TMA) for an period of 12 months, rather than an initial period of 6 months followed by a second 6 month period. Therefore, the reporting, income, and technical eligibility requirements will no longer be applied, and an additional 6 month extension will not be received when the single 12 month TMA period ends.

TIME, PLACE, MANNER OF PRESENTING VIEWS: Written or oral comments may be submitted to the Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624. Agency business hours are 8:00 a.m. to 5:00 p.m. Monday through Friday.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE: Written/Oral comments concerning this change must be received by the Alabama Medicaid Agency no later than June 4, 2015.

CONTACT PERSON AT AGENCY: Stephanie Lindsay, Administrative Secretary, Alabama Medicaid Agency, 501 Dexter Avenue, Post Office Box 5624, Montgomery, Alabama 36103-5624.


Stephanie McGee Azar
Acting Commissioner

Rule No. 560-X-25-.15 Parents and Other Caretaker Relatives, Extended Medicaid Benefits due to Spousal Support, and Transitional Medicaid Benefits.

(1) Parents and Other Caretaker Relatives (POCR)

(a) Parents and Other Caretaker Relatives (i.e. formerly Medicaid for Low Income Families [MLIF]): Parents and other caretaker relatives are defined as “parents and other caretaker relatives of dependent children with household income at or below 13%. This also includes qualified pregnant women without other children whose family income falls within the standards for POCR. A standard income disregard of 5% of the federal poverty level is applied if the individual is not eligible for coverage due to excess income.

~~Caretaker relative is a relative, who is~~ POCRs are related to the dependent child by blood, adoption, or marriage with whom the child lives and who has primary responsibility for the child’s care. An all-inclusive list of ~~A~~ caretaker relative includes:

1. The child’s father, mother, grandfather, grandmother, brother, sister, stepfather, stepmother, stepbrother, stepsister, uncle, aunt, first cousin, nephew or niece;
2. The spouse of such parent or relative, even after the marriage ends due to divorce or death.

(b) A “dependent child” is defined as a child who is under the age of 19. ~~or, up to age 21 and a full-time student.~~

(c) Self-attestation must be accepted for caretaker relatives unless there is information that is not reasonably compatible with such attestation. If the caretaker relationship must be verified the following documents are acceptable:

1. Primary sources: Birth record, school records, sworn, notarized or witnessed statement of applicant/recipient, affidavit of paternity, hospital birth record, court orders signed by the judge where the relationship is acknowledged as claimed and there is no evidence to the contrary. If no primary documentation use Declaration of Natural Relationship form with the applicant/recipient or other persons with knowledge of the relationship and secure secondary verification.
2. Secondary sources: Insurance policy, other agency records, (example Red Cross, SSA, Census records, VA, Department of Senior Services records, Department of Human Resources), bible records, income tax records, official records, (example school report card, juvenile court), other hospital records, clinic or Health Department records, church records, military records, statement from a minister, priest or rabbi, baptismal certificate or other.

(d) Technical Requirements:

1. The child must be living in the home of a parent or other close relative.
2. The child must be under age 19. ~~or up to age 21 if a full-time student.~~
3. The child must be a U.S. citizen or an alien in satisfactory immigration status.

~~4. The child must not be receiving at the same time in his own right any other form of Medicaid.~~

~~5.4.~~ The caretaker must cooperate with the Department of Human Resources and Alabama Medicaid Agency in Medical Support Enforcement Activities and in Third Party Medical Liability Activities unless good cause for not cooperating is determined.

~~6.5.~~ When application is made for a child(ren) the relative who cares for him/her (them) automatically assigns to the State all medical insurance or medical support benefits to the extent medical assistance is provided him/her or a child in their care.

~~7.6.~~ The parent/caretaker must furnish all Social Security numbers for everyone in the household or apply for a Social Security number for anyone who does not have a number and furnish the number upon receipt. (These numbers will be used in addition to any other means of identification in the administration of the program as provided for in Section 402(a)(25) of the Social Security Act). The number provided will be used in computer matches, program reviews and audits. Eligibility and income information will be requested regularly from the Internal Revenue Service, Social Security Administration, Alabama Department of Industrial Relations and other public and private organizations.

~~8.7.~~ The parent/caretaker must apply for any other benefits for which they or other members of the household appear to be eligible, such as Veteran Benefits, Social Security, Unemployment Compensation, etc.

(e) The Agency uses less restrictive **income and resource methodologies** than those in effect as of July 16, 1996, as follows:

1. Resources are excluded.

~~2. Gifts and inheritance are considered excluded income.~~

~~2. A child shall be considered to be deprived of parental care of one or both parents if the family income does not equal or exceed the eligibility standards for the appropriate family size, even though both parents may live in the home.~~

~~3. Contributions of \$50 per individual per quarter is allowed.~~

~~(f) The following individuals are deemed to be eligible for Parents and Other Caretakers:~~

~~1. Parents and Other Caretakers qualified pregnant women whose family income falls within the standards for Parents and Other Caretakers.~~

~~2. Individuals under age 19 who would qualify for Parents and Other Caretakers but do not qualify as dependent children because they are children for whom public agencies have assumed custodial and financial responsibility and they are in foster homes or private institutions.~~

~~(g) Parents and Other Caretaker Relatives Income Chart:~~

~~Household Size~~

~~1~~

~~Eligibility Standards~~

~~\$124~~

| | |
|------------------------|-------|
| 2 | \$155 |
| 3 | \$187 |
| 4 | \$221 |
| 5 | \$257 |
| 6 | \$289 |
| 7 | \$328 |
| 8 | \$361 |
| 9 | \$394 |
| 10 | \$427 |
| 11 | \$460 |
| 12 | \$492 |
| 13 | \$526 |
| 14 | \$559 |
| 15 | \$591 |
| 16 | \$624 |
| Add additional amount: | \$33 |

(2) Extended Medicaid Benefits due to Spousal Support Collections

All persons who are correctly members of the household that becomes ineligible for Parents and Other Caretaker Relatives due wholly or partly to the collection or increased collection of spousal support are entitled to extended Medicaid coverage for four months (children eligible for 12 continuous months) provided:

- (a) The case was terminated (wholly or partly) due to the collection or increased collection of spousal support; and
- (b) The household (or any member of the household) **correctly** received Medicaid in Alabama for at least three of the six months immediately prior to the first month of ineligibility.

(3) Transitional ~~Medicaid Benefits~~ Medical Assistance

When a household loses eligibility for Parents and Other Caretaker Relatives (POCR) because of earned income and has **correctly** received POCR under this group in at least three of the preceding six months, the family is entitled to ~~up to 12 months Transitional medical assistance~~ Medical Assistance (TMA). This is known as ~~Transitional Medicaid benefits~~. Once eligibility is established, ~~children are~~ the family is eligible for 12 continuous months following the month of the transitional Medicaid eligibility determination. ~~In order to be eligible, the household must file timely quarterly reports and the household's earned income, must not exceed 185 percent of the Federal poverty level.~~

~~(a) The household is eligible for Transitional Medicaid for the initial six months provided:~~

- ~~1. The household correctly received POCR in Alabama for at least three of the six months immediately prior to the first month of ineligibility, and~~
- ~~2. The case was terminated due wholly or partly to the parent/caretaker's increased earnings or hours of employment, or~~

~~(b) The parent/caretaker is eligible for the first six months of Transitional Medicaid coverage based on the termination reason. Children are eligible for 12 continuous months. The only reason (other than to return to regular POCR eligibility) Transitional Medicaid coverage may be terminated in any one of the first six months is that the household ceases to include a child and then, only the Transitional Medicaid of the adult(s) may be terminated.~~

~~(c) Medicaid coverage may be extended to the parent/caretaker for an additional six months provided:~~

- ~~1. The parent/caretaker is employed in each of the 12 months unless there is good cause for terminating employment, and~~
- ~~2. The household continues to include a child, and~~
- ~~3. The household's average gross earnings do not exceed 185% of the federal poverty level, and~~
- ~~4. The household submits a completed quarterly report by the 21st of the fourth, seventh and tenth months of the extended benefits period. The quarterly report must contain information regarding gross earnings for the three months prior to the month the report is due. Income must be verified.~~

To be eligible for 12 months of Transitional Medical Assistance all of the following must apply:

- (a) The POCR case was terminated due wholly or partly to the parent's/caretaker's increased earnings or hours of employment.
- (b) The household correctly received POCR in Alabama at least 3 of the 6 months immediately prior to the first month of ineligibility.
- (a)(c) There is a child under 19 in the home.

Author: Denise Banks, Medicaid Administrator I, Policy, Training, and Operational Readiness
Statutory Authority: Personal Responsibility and Work Opportunity Reconciliation Act of 1996, 1902(a)(10)(A)(i)(I) and 1931(b) and (d) of the Act, 42 CFR 435.110, 42 CFR 435.112, 408(a)(11)(B) and 1931(c)(1) of the Act, 408(a)(11)(A), 1902(a)(52), 1902(e)(1)(B), 1925, and 1931(c)(2) of the Act, 1902(a)(52), 1902(e)(1)(B), and 1925 of the Act.

History: Emergency Rule Filed and Effective April 9, 2003. **Amended:** Filed April 21, 2003; effective July 16, 2003. **Amended:** Filed February 11, 2014, effective March 18, 2014.

Amended: Filed April 20, 2015.