Records / Submission Packages - Your State

# WA - Submission Package - WA2021MS0001O - (WA-21-0002) - Eligibility

Summary

Reviewable Units

Versions

Correspondence Log

Approval Letter

News

Related Actions

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services Medicaid and CHIP Operations Group 601 E. 12th St., Room 355 Kansas City,, MO 64106



#### **Center for Medicaid & CHIP Services**

June 14, 2021

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

Re: Approval of State Plan Amendment WA-21-0002

Dear Ms. Birch.

On March 25, 2021, the Centers for Medicare and Medicaid Services (CMS) received Washington State Plan Amendment (SPA) WA-21-0002, which proposed to adopt a new resource disregard under the authority of section 1902(r)(2) of the Social Security Act.

We approve Washington State Plan Amendment (SPA) WA-21-0002 with an effective date(s) of January 01, 2021.

If you have any questions regarding this amendment, please contact Nikkl Lemmon at nicole.lemmon@cms.hhs.gov.

Sincerely,

James G. Scott

Director, Division of Program Operations

Center for Medicaid & CHIP Services

# WA - Submission Package - WA2021MS0001O - (WA-21-0002) - Eligibility

Summary Reviewable Units Versions Correspondence Log Approval Letter

News Related Actions

CMS-10434 OMB 0938-1188

### **Package Information**

Package ID WA2021MS00010

Program Name N/A

SPA ID WA-21-0002

Version Number 4

Submitted By Ann Myers

**Package Disposition** 



Submission Type Official

State WA

Region Seattle, WA

Package Status Approved

Submission Date 3/25/2021

Approval Date 6/14/2021 1:29 PM EDT

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

### **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID N/A

#### **State Information**

State/Territory Name: Washington

### **Submission Component**

State Plan Amendment

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date N/A

Medicaid Agency Name: Health Care Authority

**Medicaid** 

( CHIP

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

## **Package Header**

Package ID WA2021MS00010

**SPA ID** WA-21-0002

Submission Type Official

Initial Submission Date 3/25/2021

Approval Date 6/14/2021

Effective Date N/A

Superseded SPA ID N/A

#### **SPA ID and Effective Date**

SPA ID WA-21-0002

Reviewable Unit	Proposed Effective Date	Superseded SPA ID
Mandatory Eligibility Groups	1/1/2021	WA-20-0030
Qualified Medicare Beneficiaries	1/1/2021	WA-20-0030
Specified Low Income Medicare Beneficiaries	1/1/2021	WA-20-0030
Qualifying Individuals	1/1/2021	WA-20-0030
Optional Eligibility Groups	1/1/2021	WA-20-0030
Individuals Eligible for but Not Receiving Cash Assistance	1/1/2021	WA-20-0030
Individuals Eligible for Cash Except for Institutionalization	1/1/2021	WA-20-0030
Medically Needy Populations Based on Age, Blindness or Disability	1/1/2021	WA-20-0030

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS0001O

SPA ID WA-21-0002

Submission Type Official

Initial Submission Date 3/25/2021

Approval Date 6/14/2021

Effective Date N/A

Superseded SPA ID N/A

#### **Executive Summary**

Summary Description Including The agency chooses to provide a reasonable timeframe for reducing excess resources accumulated during the COVID-19 Goals and Objectives public health emergency (PHE) by certain individuals subject to the post-eligibility treatment of income (PETI) rules for longterm services and supports (LTSS). Under FFCRA, these individuals accumulated extra resources, due to no changes being made to their PETI. Income they would have otherwise paid toward the cost of their care resulted in an increase in their resources that began to exceed program standards. This methodology also will prevent an institutionalized beneficiary from having to spend down any such excess resources during the PHE. See SUPPLEMENT 8b TO ATTACHMENT 2.6-A, p 2 and SUPPLEMENT 12 TO ATTACHMENT 2.6-A, p. 1d. This methodology will remain in effect through the twelve months following the end of the COVID-19 PHE.

#### **Federal Budget Impact and Statute/Regulation Citation**

#### **Federal Budget Impact**

	Federal Fiscal Year	Amount
First	2021	\$0
Second	2022	\$0

#### **Federal Statute / Regulation Citation**

Sections 1902(a)(10)(A)(ii)(IV-VI), 1902(a)(10)(C), and 1902(r)(2) of the Social Security Act

Supporting documentation of budget impact is uploaded (optional).

Name **Date Created** 

No items available

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

## **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID N/A

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date N/A

#### **Governor's Office Review**

No comment

Comments received

No response within 45 days

Other

Describe Exempt

# **Submission - Medicaid State Plan**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

CMS-10434 OMB 0938-1188			
The submission includes the follow	wing:		
Administration			
Eligibility			
	Income/Reso	ource Me	ethodologies
	Income/Reso	ource Sta	andards
	Mandatory E	ligibility	Groups
	Reviewabl e Unit Name	In cl ud ed in An ot he r Su b mi ssi on Pa ck ag e	Source Type
	Mandatory Eligibility Groups	0	APPROVED
	Optional Elig	ibility Gr	oups
	Reviewabl e Unit Name	In cl ud ed in An ot he r Su b mi ssi on Pa ck ag e	Source Type
	Optional Eligibility Groups	0	APPROVED
	Non-Financia		

Benefits and Payments

# **Submission - Public Comment**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

## **Package Header**

Other issue

Package ID WA2021MS00010

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID N/A

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date N/A

Superseded SPA ID N/A		
Indicate whether public comment was solicited with respect to this subn	nission.	
( ) Public notice was not federally required and comment was not solicited		
<ul> <li>Public notice was not federally required, but comment was solicited</li> </ul>		
O Public notice was federally required and comment was solicited		
Indicate how public comment was solicited:		
Newspaper Announcement		
Publication in state's administrative record, in accordance with the administrative procedures requirements		
Email to Electronic Mailing List or Similar Mechanism		
Website Notice	Select the type of website	
	Website of the State Medicaid Age	ency or Responsible Agency
	Date of Posting:	•
		https://www.hca.wa.gov/about- hca/news-data-and-reports-hca/public notices
	Website for State Regulations	
	Other	
Public Hearing or Meeting		
L 1Other method		
Upload copies of public notices and other documents used		
Name	Date Created	
21-0002 LTSS COVID Resourse Disregard Public Notice WSR 21-01-071	3/22/2021 7:30 PM EDT	Po
Upload with this application a written summary of public comments reco	eived (optional)	
Name	Date Created	
No ite	ms available	
Indiana de la companya de destructura de la 18		
Indicate the key issues raised during the public comment period (options	al)	
[ Access		
[ ] Quality		
L ,Cost		
[_] Payment methodology		
L Eligibility		
Benefits		
Service delivery		

# **Submission - Tribal Input**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS00010

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID N/A

**SPA ID** WA-21-0002

Initial Submission Date 3/25/2021

Effective Date N/A

One or more Indian Health Programs or Urban Indian	Organizations
furnish health care services in this state	

Yes

No

This state plan amendment is likely to have a direct effect on Indians, Indian Health Programs or Urban Indian Organizations, as described in the state consultation plan.

Yes

**○**No

The state has solicited advice from Indian Health Programs and/or Urban Indian Organizations, as required by section 1902(a)(73) of the Social Security Act, and in accordance with the state consultation plan, prior to submission of this SPA.

Complete the following information regarding any solicitation of advice and/or tribal consultation conducted with respect to this submission:

Solicitation of advice and/or Tribal consultation was conducted in the following manner:

✓ All Indian Health Programs						
Date of solicitation/consultation:	Method of solicitation/consultation:					
12/9/2020	Email and hard copy letter					
All Urban Indian Organizations						
Date of solicitation/consultation:	Method of solicitation/consultation:					
12/9/2020	Email and hard copy letter					
States are not required to consult with Indian tribal governments, but if such consconsultation below:	sultation was conducted voluntarily, provide information about such					
🖳 All Indian Tribes						
Date of consultation:	Method of consultation:					
3/24/2021	Email and hard copy letter					

The state must upload copies of documents that support the solicitation of advice in accordance with statutory requirements, including any notices sent to Indian Health Programs and/or Urban Indian Organizations, as well as attendee lists if face-to-face meetings were held. Also upload documents with comments received from Indian Health Programs or Urban Indian Organizations and the state's responses to any issues raised. Alternatively indicate the key issues and summarize any comments received below and describe how the state incorporated them into the design of its program.

Name Date Created

21-0002 LTSS COVID Resourse Disregard Tribal Notice Documentation

3/22/2021 7:59 PM EDT



Indicate	the	key	issues	raised	(opti	ional
----------	-----	-----	--------	--------	-------	-------

Access

Quality

Cost

[ Payment methodology

Eligibility

Benefits

Service delivery

Other issue

Name of issue:

Summarize comments:

Summarize response:

Request for draft SPA

A request was made for a copy of the draft SPA.

A draft of the SPA was sent by email with an extensive description of the purpose of the SPA. Response by email or discussion on a phone call was requested.

# **Medicaid State Plan Eligibility**

### **Mandatory Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS00010

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

User-Entered

#### SPA ID WA-21-0002

APPROVED

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

#### **Mandatory Coverage**

A. The state provides Medicaid to mandatory groups of individuals. The mandatory groups covered are:

#### **Families and Adults**

Specified Low Income

Medicare Beneficiaries

Eligibility Group Name		Covered In State Plan	Include RU in Package	Included in Another Submission Package	Source Type 🚱
Infants and Children under Age 19	P	$\square$		0	CONVERTED
Parents and Other Caretaker Relatives	9	$oxed{oxed}$		0	CONVERTED
Pregnant Women	9	$\Box$		0	CONVERTED
Deemed Newborns	9			0	NEW
Children with Title IV-E Adoption Assistance, Foster Care or Guardianship Care	P	<b></b>		0	NEW
Former Foster Care Children	9			0	NEW
Transitional Medical Assistance	9	<b>V</b>		0	NEW
Extended Medicaid due to Spousal Support Collections	P	$\checkmark$		0	NEW
Aged, Blind and Disabled					
Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 😯
SSI Beneficiaries	9			0	NEW
Closed Eligibility Groups	P	$\mathbf{\Xi}$	1_1	0	NEW
Individuals Deemed To Be Receiving SSI	Ø			0	NEW
Working Individuals under 1619(b)	P	[~]		0	NEW
Qualified Medicare Beneficiaries	ø	덩	<b>9</b>	0	APPROVED
Qualified Disabled and Working Individuals	9	~		0	NEW

Y

Eligibility Group Name

Covered In State Plan

Include RU In Package
Source Type ©

Qualifying Individuals

APPROVED

Mandatory Eligibility Groups						
MEDICAID   Medicaid State Plan   Eligib	ility   WA2021MS000	010   WA-21-0002				
Package Header						
Package ID	WA2021MS0001C	)		SPA ID	WA-21-0002	
Submission Type	Official		Initial Submis	sion Date	3/25/2021	
Approval Date	6/14/2021		Effec	tive Date	1/1/2021	
Superseded SPA ID	WA-20-0030					
	User-Entered					
B. The state elects the Adult Group	, described at 42 (	CFR 435.119.				
Yes No						
Families and Adults						
Eligibility Group Name		Covered In State Plan	Include RU In Package		in Another on Package	Source Type 🕢
Adult Group	0	$ \mathbf{\nabla}$		(	C	CONVERTED

# **Eligibility Groups Deselected from Coverage**

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

C. Additional Information (optional)

# **Medicaid State Plan Eligibility**

## **Eligibility Groups - Mandatory Coverage**

#### **Qualified Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

#### **Package Header**

Package ID WA2021MS00010

SPA ID WA-21-0002

Submission Type Official

Initial Submission Date 3/25/2021

Approval Date 6/14/2021

Effective Date 1/1/2021

Superseded SPA ID WA-20-0030

System-Derived

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
- 2. Have income and resources at or below the standard for this group.

#### **Qualified Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

## **B. Financial Methodologies**

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2. Less restrictive methodolo	gies are used ir	n calculating	countable income
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Yes

( No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Wages paid by the Census Bureau for

temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:

Income tax obligation

MSP

Description:

Unearned income withheld, prior receipt by the individual, for

income tax purposes, or otherwise withheld beyond the individual's

control, is considered exempt

when determining eligibility

When determining the available income of an individual for the QMB or SLMB program the agency

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

shall exclude from countable income an amount equal to that expended on medical expenses.

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

Yes

( No

The less restrictive resource methodologies are:

MA specified type of resource is disregarded:

Name of resource type:

Description:

Independence Account - earnings while enrolled in MBI

Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket and BBA work incentives eligibility groups.

Name of resource type: Description: Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt resource. The contract must provide a reasonable rate of return: 1) the interest is consistent Sales contract resource with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does not exceed thirty years. Both interest and principal received in the form of payments are considered unearned income, unless otherwise exempted. All funds in IDA accounts funded IDA account under the Assets for Independence Non-cash resources, which cannot be expected to be converted into cash within 20 working days, are 20 days not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessful. When determining the countable resources for a Holocaust survivor, Holocaust survivor exclude recoveries of insurance proceeds or other assets.

The following less restrictive methodologies are used:

Name of methodology:

FFCRA plus 12

Description:

Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of-income (PETI) rules but which became countable resources on or after March 18, 2020. Such resources will be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.

#### **Qualified Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS0001O | WA-21-0002

#### **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

#### SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

#### C. Income Standard Used

The amount of the income standard for this group is 100% FPL.

#### **D. Resource Standard Used**

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

#### **E. Medical Assistance Provided**

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and B

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

### **Qualified Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

### **Package Header**

Package ID WA2021MS00010

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

# F. Additional Information (optional)

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

# **Medicaid State Plan Eligibility**

## Eligibility Groups - Mandatory Coverage

#### **Specified Low Income Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

#### **Package Header**

Package ID WA2021MS0001O

**SPA ID** WA-21-0002

**Submission Type** Official

Initial Submission Date 3/25/2021

Approval Date 6/14/2021

Effective Date 1/1/2021

Superseded SPA ID WA-20-0030

System-Derived

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Have income below the income standard and resources at or below the resource standard for this group.

#### Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

#### **B. Financial Methodologies**

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2	Less restrictive	methodologies	are used in	calculating	countable income.
ے.	LEGG LEGGISCHAC	HIECHIOUOLOGICS	are useu III	calculatiliz	countable litcolle.

Yes

No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Wages paid by the Census Bureau for

temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:

Income tax obligation

MSP

Description:

Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility

When determining the available income of an individual for the QMB or SLMB program the agency shall exclude from countable income an amount equal to that

expended on medical expenses.

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

Yes

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:

Description:

Independence Account - earnings while enrolled in MBI

Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket and BBA work incentives eligibility groups.

	Name of resource type:	Description:
	Sales contract resource	Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt resource. The contract must provide a reasonable rate of return: 1) the interest is consistent with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does not exceed thirty years. Both interest and principal received in the form of payments are considered unearned income, unless otherwise exempted.
	IDA account	All funds in IDA accounts funded under the Assets for Independence Act
	20 days	Non-cash resources, which cannot be expected to be converted into cash within 20 working days, are not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessful.
	Holocaust survivor	When determining the countable resources for a Holocaust survivor, exclude recoveries of insurance proceeds or other assets.
The following less restrictive methodologies are used:		
	Name of methodology:	Description:

FFCRA plus 12

### Description:

Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-ofincome (PETI) rules but which became countable resources on or after March 18, 2020. Such resources will be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.

#### **Specified Low Income Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS00010

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

#### C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

#### **D. Resource Standard Used**

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

#### **E. Medical Assistance Provided**

Medical assistance is limited to payment for Medicare Part B premiums.

## **Specified Low Income Medicare Beneficiaries**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

# **Package Header**

Package ID WA2021MS0001O

Submission Type Official

 Approval Date
 6/14/2021

 Superseded SPA ID
 WA-20-0030

System-Derived

F. Additional Information (optional)

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

# **Medicaid State Plan Eligibility**

## **Eligibility Groups - Mandatory Coverage**

#### Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

#### **Package Header**

Package ID WA2021MS00010

SPA ID WA-21-0002

Submission Type Official

Initial Submission Date 3/25/2021

Approval Date 6/14/2021

Effective Date 1/1/2021

Superseded SPA ID WA-20-0030

System-Derived

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

#### A. Characteristics

#### Individuals qualifying under this eligibility group must meet all of the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Are not otherwise eligible for Medicaid under the state plan.
- 3. Have income below the income standard and resources at or below the resource standard for this group.

#### Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

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Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

## **B.** Financial Methodologies

1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

2	Loca	restrictive	methodologies	e are used in	calculation	countable income	
4	. Less	restrictive	methodologies	s are used in	i caiculating	countable income	١.

Yes

CINO

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Wages paid by the Census Bureau for

temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:

Income tax obligation

Description:

Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's

control, is considered exempt when determining eligibility

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

Yes

CINO

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:

Sales contract resource

Description:

Independence Account - earnings while enrolled in MBI

Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket and BBA work incentives

eligibility groups.

Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt resource. The contract must provide a reasonable rate of return: 1) the interest is consistent with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does

not exceed thirty years. Both interest and principal received in the form of payments are considered unearned income, unless otherwise exempted.

IDA account

All funds in IDA accounts funded under the Assets for Independence

Act

	Name of resource type:	Description:
	20 days	Non-cash resources, which cannot be expected to be converted into cash within 20 working days, are not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessful.
	Holocaust survivor	When determining the countable resources for a Holocaust survivor, exclude recoveries of insurance proceeds or other assets.
The following less restrictive methodologies are used:		
	Name of methodology:	Description:
	FFCRA plus 12	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of-income (PETI) rules but which became countable resources on or after March 18, 2020. Such resources will be disregarded through the twelve months following the end of the month in

emergency ends.

#### **Qualifying Individuals**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS0001O

Submission Type Official

Approval Date 6/14/2021

Superseded SPA ID WA-20-0030

System-Derived

#### SPA ID WA-21-0002

Initial Submission Date 3/25/2021

Effective Date 1/1/2021

#### C. Income Standard Used

Family income must be at or above 120% FPL and below 135% FPL.

#### **D. Resource Standard Used**

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

#### **E. Medical Assistance Provided**

Medical assistance is limited to payment for Medicare Part B premiums.

## **Qualifying Individuals**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

### **Package Header**

Package ID WA2021MS0001O

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# F. Additional Information (optional)

SPA ID WA-21-0002

Initial Submission Date 3/25/2021

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# **Medicaid State Plan Eligibility**

### **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

Package ID WA2021MS00010

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User-Entered

#### SPA ID WA-21-0002

Initial Submission Date 3/25/2021

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### **A. Options for Coverage**

The state provides Medicaid to specified optional groups of individuals.

Yes No

The optional eligibility groups covered in the state plan are (elections made in this screen may not be comprehensive during the transition period from the paper-based state plan to MACPro):

#### **Families and Adults**

Institutionalization

Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🔮
Optional Coverage of Parents and Other Caretaker Relatives	9			0	NEW
Reasonable Classifications of Individuals under Age 21	9	团	:0	0	CONVERTED
Children with Non-IV-E Adoption Assistance	9			0	CONVERTED
Independent Foster Care Adolescents	9	Ц		0	NEW
Optional Targeted Low Income Children	9			0	NEW
Individuals above 133% FPL under Age 65	9			0	NEW
Individuals Needing Treatment for Breast or Cervical Cancer	9	<b>2</b>		0	NEW
Individuals Eligible for Family Planning Services	9			0	NEW
Individuals with Tuberculosis	9			0	NEW
Individuals Electing COBRA Continuation Coverage	9	D		0	NEW
Aged, Blind and Disabled					
Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕖
Individuals Eligible for but Not Receiving Cash Assistance	9		V	0	APPROVED
Individuals Eligible for  Cash Except for  Institutionalization	9		<b>∀</b> )	0	APPROVED

Eligibility Group Name		Covered In State Plan	Include RU in Package	Included in Another Submission Package	Source Type 🛭
Individuals Receiving Home and Community- Based Waiver Services under Institutional Rules	9	<b></b>	ū	0	APPROVED
Optional State Supplement Beneficiaries	•	D	רו	0	NEW
Individuals in Institutions Eligible under a Special Income Level	P	☑	D	0	NEW
PACE Participants	9	lacksquare		0	NEW
Individuals Receiving Hospice	9	$ \mathbf{\nabla}$		0	NEW
Children under Age 19 with a Disability	•			0	NEW
Age and Disability- Related Poverty Level	P			0	NEW
Work Incentives	P			0	APPROVED
Ticket to Work Basic	P	$ \checkmark $		0	APPROVED
Ticket to Work Medical Improvements	9			0	APPROVED
Family Opportunity Act Children with a Disability	P			0	NEW
Individuals Receiving State Plan Home and Community-Based Services	P		Д	0	NEW
Individuals Receiving State Plan Home and Community-Based Services Who Are Otherwise Eligible for HCBS Waivers	P			0	NEW

## **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

### **Package Header**

Package ID WA2021MS0001O

**SPA ID** WA-21-0002

Submission Type Official

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Effective Date 1/1/2021

Superseded SPA ID WA-20-0030

User-Entered

## **B. Medically Needy Options for Coverage**

The state provides Medicaid to specified groups of individuals who are medically needy
--

Yes ( No

Disability

The medically needy eligibility groups covered in the state plan are:

### 1. Mandatory Medically Needy:

Families and Adults					
Eligibility Group Name		Covered in State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🕖
Medically Needy Pregnant Women	P			0	NEW
Medically Needy Children under Age 18	Ø	$\Theta$		0	NEW
Aged, Blind and Disable	d				
Eligibility Group Name		Covered In State Plan	Include RU in Package	Included in Another Submission Package	Source Type 🕝
Protected Medically Needy Individuals Who Were Eligible in 1973	9			0	NEW
2. Optional Medica	lly Needy:				
Families and Adults					
Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🛭
Medically Needy Reasonable Classifications of Individuals under Age 21	9	<b></b>		0	NEW
Medically Needy Parents and Other Caretaker Relatives	9		13	0	NEW
Aged, Blind and Disable	d				
Eligibility Group Name		Covered In State Plan	Include RU In Package	Included in Another Submission Package	Source Type 🔞
Medically Needy Populations Based on Age, Blindness or	9	S	lacksquare	0	APPROVED

#### **Optional Eligibility Groups**

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

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## **C. Additional Information (optional)**

Effective January 1, 2019, Washington no longer covers the Medicaid eligibility group for individuals who qualify on the basis of receiving optional state supplement payments (1902(a)(10)(A)(ii)(XI) 42 CFR 435.232 and 435.434).

### **Eligibility Groups Deselected from Coverage**

The following eligibility groups were previously covered in the source approved version of the state plan and deselected from coverage as part of this submission package:

N/A

# **Medicaid State Plan Eligibility**

**Eligibility Groups - Options for Coverage** 

### Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals who are eligible for but not receiving federal cash assistance or an optional state supplement.

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The state covers the optional Individuals Eligible for but Not Receiving Cash Assistance eligibility group in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet the eligibility requirements of at least one of the following cash assistance program	ns:

b. Optional State Supplement

c. AFDO

2. Do not receive cash assistance under these programs.

## Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

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## **B. Individuals Covered**

1. The state covers all individuals who meet the characteristics described in section A.



○ No

### Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

#### **Package Header**

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### C. Financial Methodologies

1. In calculating household in	come and resources for individuals wh	o are seeking eligibility on the	e basis of being age 65 or o	older or having blindness or	disability
SSI methodologies are used.	Please refer as necessary to Non-MAG	I Methodologies, completed I	by the state		

3.	Less	restrictive	methodologie	s are use	ed in cal	culating -	countable	income.

Yes

CINO

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Wages paid by the Census Bureau for

temporary employment related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:

Description:

Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's

Income tax obligation

control, is considered exempt when determining eligibility

4. Less restrictive methodologies are used in calculating countable resources.

Yes

O No

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:

Description:

Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt

resource. The contract must provide a

property sales contract

reasonable rate of return: 1) the interest is consistent with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does not exceed thirty years. Both interest and principal received in the form of payments are considered unearned income,

unless otherwise exempted.

🗹 A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

Name of methodology:	Description:
One-half resources	Effective January 1, 1989, it is presumed that one-half of the total resources held jointly by the husband and wife, or held separately by the applicant/recipient, are owned by each spouse (TN 89-2, Approved 8/17/90)
Independence Account - earnings while enrolled in MBI	Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket and BBA work incentives eligibility groups.
IDA account	All funds in IDA accounts funded under the Assets for Independence Act
20 days	Non-cash resources, which cannot be expected to be converted into cash within 20 working days, are not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessful.
Holocaust survivor	When determining the countable resources for a Holocaust survivor, exclude recoveries of insurance proceeds or other assets.
Non-exempt resources	Non-exempt resources in excess of the Medically Needy resource levels can, at the individuals option, be reduced by allowable incurred expenses as long as such expenses have not been used to reduce excess income.
FFCRA plus 12	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of-income (PETI) rules but which became countable resources on or after March 18, 2020. Such resources will be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.

## Individuals Eligible for but Not Receiving Cash Assistance

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### **Package Header**

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## **D. Income Standard Used**

The income standard used is the standard of the most closely related cash assistance program.

#### E. Resource Standard Used

The resource standard used is the standard of the most closely related cash assistance program.

## Individuals Eligible for but Not Receiving Cash Assistance

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

## **Package Header**

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# F. Additional Information (optional)

# **Medicaid State Plan Eligibility**

## **Eligibility Groups - Options for Coverage**

### Individuals Eligible for Cash Except for Institutionalization

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals who would be eligible for federal cash assistance or an optional state supplement, except for institutionalization.

### **Package Header**

Package ID WA2021MS0001O

SPA ID WA-21-0002

Submission Type Official

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Effective Date 1/1/2021

Superseded SPA ID WA-20-0030

System-Derived

The state covers the optional Individuals Eligible for Cash Except for Institutionalization eligibility group in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1, Are in a medical institution,

2. Would meet the eligibility requirements for at least one of the following cash assistance programs, but for the lower income standards used to determine eligibility for institutionalized individuals:

a. SSI

b. Optional State Supplement

c. AFDC

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### **B.** Individuals Covered

1. The state covers all individuals who meet the characteristics described in section A.

Yes

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## C. Financial Methodologies

1. In calculating household in	come and resources for individuals who are seeking eligibility on the basis of being age 65 or older or having blindness or disability
SSI methodologies are used.	Please refer as necessary to Non-MAGI Methodologies, completed by the state.

. In calculating household income and resou	room for manufations for which AFDC is the		- F- H - 1
. In casculating household income and resou	rces for bobulations for which AFDC is the	most ciosely related brogram the	- Iniinwing methadalawijee) are ucad

C. a. MAGI-like methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

**b** b. AFDC methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

3. Less restrictive methodologies are used in calculating countable income.

Yes

() No

The less restrictive income methodologies are:

The difference between one income standard and another is disregarded.

O Between the following percentages of the FPL:

Between the medically needy income limit and a percentage of the

O Between the SSI Federal Benefit Rate

Between other income standards:

The following less restrictive methodologies are used:

Between this standard: TANF payment standard by family size

and this standard: AFDC payment standard by family size

Name of methodology:

Description:

Effective July 1, 1986, if the community income received in the name of the non-applicant or ineligible spouse, living in a separate residence, exceeds the community income received in the name of the applicant/recipient spouse, the applicant/recipient spouse's interest in that excess is

considered unavailable to the applicant/recipient.

income tax obligation

community income

Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility

Disregard income equal to the difference between the Federal Benefit Rate and the Categorically Needy Income Level for individuals and couples as in effect on January

2002

FBR and CN

4. Less restrictive methodologies are used in calculating countable resources.

Yes

No

The less restrictive resource methodologies are:

A specified type of resource is disregarded:

Name of resource type:	Description:
property sales contract	Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt resource. The contract must provide a reasonable rate of return: 1) the interest is consistent with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does not exceed thirty years. Both interest and principal received in the form of payments are
	considered unearned income, unless otherwise exempted.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

Name of methodology:	Description:
One-half resources	Effective January 1, 1989, it is presumed that one-half of the total resources held jointly by the husband and wife, or held separately by the applicant/recipient, are owned by each spouse (TN 89-2, Approved 8/17/90)
Independence Account - earnings while enrolled in MBI	Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket and BBA work incentives eligibility groups.
IDA account	All funds in IDA accounts funded under the Assets for Independence Act
20 days	Non-cash resources, which cannot be expected to be converted into cash within 20 working days, are not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessful.
Holocaust survivor	When determining the countable resources for a Holocaust survivor, exclude recoveries of insurance proceeds or other assets.
Non-exempt resources	Non-exempt resources in excess of the Medically Needy resource levels can, at the individuals option, be reduced by allowable incurred expenses as long as such expenses have not been used to reduce excess income.

Name of methodology:

Description:

Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-ofincome (PETI) rules but which became countable resources on or after March 18, 2020. Such

resources will

be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.

FFCRA plus 12

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### **D. Income Standard Used**

The income standard used is the standard of the most closely related cash assistance program.

#### **E. Resource Standard Used**

The resource standard used is the standard of the most closely related cash assistance program.

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F. Additional Information (optional)

# **Medicaid State Plan Eligibility**

## **Eligibility Groups - Medically Needy**

### Medically Needy Populations Based on Age, Blindness or Disability

MEDICAID | Medicaid State Plan | Eligibility | WA2021MS00010 | WA-21-0002

Individuals who are age 65 or older or who have blindness or a disability who do not qualify as categorically needy.

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The state covers the optional Medically Needy Populations Based on Age, Blindness or Disability eligibility group in accordance with the following provisions:

#### A. Characteristics

Individuals qualifying under this eligibility group must meet the following criteria:

1. Meet at least one of the following:

a. Are age 65 or older;

b. Have blindness; or

c. Have a disability.

2. Are not otherwise eligible for categorically needy coverage under the state plan.

3. Have income at or below the medically needy income level and resources at or below the medically needy resource level.

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### **B.** Individuals Covered

The state covers the following populations:

🗹 1. Individuals age 65 or older

2. Individuals with blindness

3. Individuals who have a disability

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## **C. Financial Methodologies**

1. The state uses the same financial methodology for all individuals covered.

Yes

ONo

2. The financial methodology used is:

a. SSI methodologies. Please refer as necessary to Non-MAGI Methodologies, completed by the state.

b. Less restrictive methodologies are used in calculating countable income.

Yes No

The less restrictive income methodologies are:

Census Bureau wages are disregarded.

Description of disregard: Wages

paid by the Census Bureau for temporary employme nt related to census activities are excluded.

The following less restrictive methodologies are used:

Name of methodology:

Income tax

obligation

Description:

Unearned income withheld, prior receipt by the individual, for income tax purposes, or otherwise withheld beyond the individual's control, is considered exempt when determining eligibility

Income of an individual is exempt in an amount equal

Maintenance for MN

to the maintenance allowance of the individual's spouse, living in the same household, who is eligible under clause (VI) of section 1902 (a) (10) (A) (ii) of the Act, less the income of the spouse.

Name of Description: methodology: Effective July 1, 1986, if the community income received in the name of the nonapplicant or ineligible spouse, living in a separate residence, exceeds the community community income income received in the name of the applicant/recipient spouse, the applicant/recipient spouse's interest in that excess is considered

c. Less restrictive methodologies are used in calculating countable resources.

Yes No

The less restrictive resource methodologies are:

Real property not otherwise excluded is disregarded.

Description of disregard: Non-cash

unavailable to the applicant/recipient.

resources, which cannot be expected to be converted into cash within 20 working days, are not considered available to the extent that an ongoing bona fide effort to convert them into cash is unsuccessf

The state uses a less restrictive methodology with respect to the treatment of resources set aside in specified types of accounts.

Freedo

account

m

s

Resourc Description: All funds in es set IDA aside in accounts an funded Assets under the for Assets for Indepe Independe ndence nce Act Act (IDA) account Resourc **Description:** Designated es set aside in Indepe ndence/

Designated separate account that consists only of earnings resulting from work activity while enrolled in the Ticket

and BBA work incentives eligibility groups.

A beneficiary of a "qualified state long-term care insurance partnership" policy (partnership policy), as defined in section 1917(b)(1)(C) of the Social Security Act and 45 CFR 144.200 et seq., is provided a resource disregard, equal to the amount of the insurance benefit payments made to or on behalf of the individual from the partnership policy.

The following less restrictive methodologies are used:

<b>u.</b>	
Name of methodology:	Description:
FFCRA plus 12	Income that would have otherwise been part of an individual's liability for his or her institutional or home and community-based waiver services based on application of the post-eligibility treatment-of-income (PETI) rules but which became countable resources on or after March 18, 2020. Such resources will be disregarded through the twelve months following the end of the month in which the COVID-19 public health emergency ends.
sales contract	Effective August 1, 1993, to the extent that it is not transferred, a sales contract on property that was the principal place of residence at the time of institutionalization is an exempt resource. The contract must provide a reasonable rate of return: 1) the interest is consistent with prevailing rates at the time of the sale; and 2) the payment of amount owed is anticipated within the lifetime of the client but does not exceed thirty years Both interest

years. Both interest and principal received in the form of payments are considered unearned income, unless otherwise exempted.

Name of Description: methodology: Non-exempt resources in excess of the Medically Needy resource levels can, at the individuals option, LTC MN excess be reduced by resources allowable incurred expenses as long as such expenses have not been used to reduce excess income. When determining the countable resources for a Holocaust survivor Holocaust survivor, proceeds exclude recoveries of insurance proceeds or other assets. Effective January 1, 1989, it is presumed that one-half of the total resources held jointly by the husband and wife, or One-half resources held separately by the applicant/recipient, are owned by each spouse (TN 89-2,

Approved 8/17/90)

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### **D. Income Standard Used**

The income standard used for this group is described in the Medically Needy Income Level RU.

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### **E. Resource Standard Used**

The resource standard used for this group is described in the Medically Needy Resource Level RU.

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## F. Spenddown

The state allows individuals to deduct incurred medical and remedial expenses (spend down) to become eligible under this group. Spenddown is defined in the Handling of Excess Income (Spenddown) RU.

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**G. Additional Information (optional)** 

PRA Disclaime Electronic Centers for health and reliection of state plans and plan aroundings information accordance with (42 U.S.C. 1356.8) and (42 U.S.C. 1356

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