

HUMAN SERVICES DEPARTMENT [441]

**Notice of Intended Action**

Pursuant to the authority of Iowa Code section 249A.4 and 2009 Iowa Acts, Senate File 389, section 38, the Department of Human Services proposes to amend Chapter 75, “Conditions of Eligibility,” and Chapter 76, “Application and Investigation,” Iowa Administrative Code.

The proposed amendments will implement Medicaid “express lane” eligibility for children. Express lane eligibility is a process by which the Medicaid program can rely on a finding made under another program with similar eligibility requirements to determine that a child meets Medicaid eligibility requirements. The Children’s Health Insurance Program Reauthorization Act of 2009 (CHIPRA) authorized, as a state option, the reliance on a finding from an express lane agency in determining whether a child satisfies one or more components of Medicaid eligibility. State legislation in 2009 Iowa Acts, Senate File 389, requires the Department to implement CHIPRA’s express lane option in order to qualify for federal performance bonus funding.

Under these amendments, children under the age of 19 who have already been determined eligible for Food Assistance based on the family’s income and circumstances will be allowed to enroll in Medicaid under the Mothers and Children (MAC) coverage group without filing a separate application. Approximately one-tenth of the children now eligible for Food Assistance are not receiving medical assistance.

The family must affirmatively request the child's Medicaid enrollment within a reasonable period of time and must still meet the specific Medicaid requirements of attestation and verification of alien or citizen status. Medicaid enrollment through the "express lane" process will be for an initial period of eligibility (up to 12 months), after which all redeterminations of eligibility will be made based on standard Medicaid eligibility requirements and procedures.

Implementation of the express lane option requires separate error rate sampling, monitoring, and reporting. Error rates exceeding 3 percent will require corrective action planning and federal repayment of error cases.

The proposed amendments also make technical changes to update form names and numbers.

These amendments do not provide for waivers in specified situations because they benefit the families affected by streamlining eligibility procedures and making more children eligible for Medicaid benefits. Requests for the waiver of any rule may be submitted under the Department's general rule on exceptions at 441—1.8(17A,217).

Any interested person may make written comments on the proposed amendments on or before February 2, 2010. Comments should be directed to Mary Ellen Imlau, Bureau of Policy Analysis and Appeals, Department of Human Services, Hoover State Office Building, 1305 East Walnut Street, Des Moines, Iowa 50319-0114. Comments may be sent by fax to (515)281-4980 or by E-mail to [policyanalysis@dhs.state.ia.us](mailto:policyanalysis@dhs.state.ia.us).

These amendments are intended to implement Iowa Code section 249A.3.

The following amendments are proposed.

ITEM 1. Amend paragraphs **75.2(1)“a”** and **“b”** as follows:

a. Persons who have been approved by the Social Security Administration for ~~supplemental security income~~ Supplemental Security Income shall complete Form ~~470-2304, 470-2304(S), 470-0364, or 470-0364(S), 470-0364(M), or 470-2304(MS)~~, SSI Medicaid Information, and return it to the department.

b. Persons eligible for Part B of the Medicare program shall make assignment to the department on Form ~~470-2304, 470-2304(S), 470-0364, or 470-0364(S), 470-0364(M), or 470-2304(MS)~~, SSI Medicaid Information

ITEM 2. Amend paragraph **75.11(2)“b”** as follows:

b. As a condition of eligibility, each member shall complete and sign Form 470-2549, Statement of Citizenship Status, attesting to the member’s citizenship or alien status. When the member is incompetent or deceased, the form shall be signed by someone acting responsibly on the member’s behalf. An adult shall sign the form for dependent children.

(1) As a condition of eligibility, all applicants for Medicaid shall attest to their citizenship or alien status by signing the application form which contains the same declaration.

(2) As a condition of continued eligibility, SSI-related Medicaid members not actually receiving SSI who have been continuous members since August 1, 1988, shall attest to their citizenship or alien status by signing the application form which contains a similar declaration at time of review.

(3) An attestation of citizenship or alien status completed on any one of the following forms shall meet the requirements of subrule 75.11(2) for children under the age of 19 who are otherwise eligible pursuant to 441—subrule 76.1(8):

1. Application for Food Assistance, Form 470-0306 or 470-0307 (Spanish);

2. Health and Financial Support Application, Form 470-0462 or 470-0466 (Spanish);

3. Review/Recertification Eligibility Document, Form 470-2881, 470-2881(S), 470-2881(M), or 470-2881(MS);

ITEM 3. Amend paragraphs **76.1(1)“a,” “c,” and “e”** as follows:

a. An application for family medical assistance-related Medicaid programs shall be submitted on the Health and Financial Support Application, Form 470-0462 or Form 470-0466 (Spanish); the Health Services Application, Form 470-2927 or Form 470-2927(S); the HAWK-I Application, Comm. 156; or the HAWK-I Electronic Application Summary and Signature Page, Form 470-4016. However, no application form is required for express lane eligibility under subrule 76.1(8), based on receipt of food assistance.

c. A person who is a recipient of ~~supplemental security income~~ Supplemental Security Income (SSI) benefits shall not be required to complete a separate Medicaid application. If the department does not have all information necessary to establish that an SSI recipient meets all Medicaid eligibility requirements, the SSI recipient may be required to complete Form ~~470-2304, 470-2304(S),~~ 470-0364, ~~or 470-0364(S),~~ 470-0364(M), or 470-2304(MS), SSI Medicaid Information, and may be required to attend an interview to clarify information on this form.

e. The department shall initiate a medical assistance application for a person whose application data is received from the federal Social Security Administration pursuant to 42 U.S.C. 1320b-14(c)(3).

(1) No change.

(2) The department shall mail Form 470-4846, Medicare Savings ~~Program and Food Assistance Application~~ Programs Additional Information Request, to the person whose data was transmitted to gather the rest of the information needed to determine eligibility.

ITEM 4. Adopt the following new subrule **76.1(8)**:

**76.1(8)** Express lane eligibility. For purposes of an initial determination of medical assistance eligibility, the department will use express lane procedures as allowed by 42 U.S.C. § 1396a(e)(13) as described in this subrule.

a. The department shall rely on a determination of eligibility for food assistance pursuant to 441—chapter 65 as establishing that a child under the age of 19 meets all eligibility requirements in 441—subrule 75.1(28) except for citizenship or alienage requirements, unless:

(1) The child’s household already includes other persons receiving FMAP-related Medicaid, or

(2) The child was previously granted express lane eligibility and the household has not had at least a two-month break in food assistance eligibility since that time.

b. To obtain express lane eligibility, the child or family must affirmatively request medical assistance for the child on form 470-4851, Express Lane Medicaid for Children. The department will mail Form 470-4851 to the child or family when a child eligible for the express lane option who is not already a Medicaid member is approved for food assistance pursuant to 441—chapter 65. The child or family must sign Form 470-4851 and return it to the department within 30 calendar days of issuance.

c. As a condition of express lane eligibility, the child must meet citizenship or alienage requirements of rule 441—75.11(249A).

d. The month of application for express lane eligibility is the month of the child’s food assistance effective date. Express lane eligibility begins on the first day of the month of the child’s food assistance effective date.

e. Retroactive eligibility is available for any of the three months before the effective date of the child’s express lane eligibility when the child:

(1) Has medical bills for covered services that were received in that period, and

(2) Would have been eligible for medical assistance benefits in the month services were received if application for medical assistance had been made in that month, determined without regard to food assistance eligibility.

f. After the initial express lane determination of medical assistance eligibility, all redeterminations of medical assistance eligibility shall be made without reliance on any food assistance eligibility determination.

ITEM 5. Amend paragraph **76.5(1)“d”** as follows:

d. Persons receiving only ~~supplemental security income~~ Supplemental Security Income benefits who wish to make application for Medicaid benefits for three months preceding the month of application shall complete Form ~~470-2304, 470-2304(S), 470-0364, or 470-0364(S), 470-0364(M), or 470-2304(MS)~~, SSI Medicaid Information.