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January 17, 2014

MEDICAID MANUAL (OFI Policy Manual, Volume II) Transmittal NO.47

TO: County Departments of Family and Children Services
State DFCS Staff

FROM: Sharon Hill, Division Director
Division of Family and Children Services

RE: Medicaid Policy Updates/Changes

PURPOSE: To provide DFCS field staff an update to the Medicaid Policy Manual as revised to be in accordance with the most current policy clearances received from the Department of Community Health. The majority of the changes affect Family Medicaid as a result of the Affordable Care Act, and include changes in Assistance Unit composition and Budgeting for Modified Adjusted Gross Income (MAGI) Classes of Assistance. A detailed overview of all revisions to the Medicaid manual is listed below. The Affordable Care Act of 2009 had a tremendous impact on existing Family Medicaid policy. This manual transmittal may not have revised all the impacted policy. Policy that specifically refers to Low Income Medicaid (LIM), RSM Child(ren) Medicaid or RSM Pregnant Woman Medicaid without reference to MAGI Medicaid does NOT supercede the regulations or state Medicaid policy as revised by the Affordable Care Act. Please contact the DFCS State Medicaid Policy Unit with any questions regarding whether policy listed in a section not revised for MT 47 is the current policy under the Affordable Care Act.

For All Classes of Assistance, whether ABD or Family Medicaid:

- Added COMPASS to list of acceptable applications
- Section 2051 was clarified to state that electronic data sources should be used as much as possible to verify income, and how to resolve inconsistencies between data sources and the client's statement
- Updated Section 2499 to reflect how income is treated in MAGI Classes of Assistance

For Children in Placement only:

- Section 2819 was added addressing Former Foster Care Medicaid
- Section 2818 was updated to state that Chafee recipients will be enrolled with Amerigroup CMO

For ABD Medicaid only:

- New QIT Templates have been added, and Template 3 has been removed
- Section 2932 for the Georgia Medicaid Management Program ((GAMMP) has been removed as it is obsolete
- A new DMA-7 form for NOW/COMP has been added
- In Section 2316, the home place equity value limit was updated
- Appendix A-1 was updated with the 2014 income limits.

For Family Medicaid only:

- Appendix A-2 was updated with the 2014 income limits.
- Sections 2160,2162, 2166, 2170, 2174, 2182, 2184, 2196 were updated with the new MAGI policies and procedures.
- Section 2610 was updated with new MAGI BG/AU composition policy and procedures
- Sections 2663,2667,2669 were updated with new MAGI and Non MAGI budgeting procedures
- Section 2655 was updated with new MAGI income deductions

Forms:

- New Form 94A Medicaid Streamlined Application added
- New DMA-7 Level of Care form for NOW/COMP Waiver
- New 298Q for Q-Track and Senior SNAP cases
- New QIT Templates

UPDATES:

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Section	Page	Comments
2005	2	Updated contact info for getting an incorrect or validated SSN corrected in SUCCESS.
2051	1-5	Added information on self attestation, using data sources for verification, and resolving inconsistencies. Added statement that pregnancy no longer requires verification, but multiple fetuses does except for the Pregnant Woman COA. Added NOTE that collateral contact is not sufficient for verification of income, some form of documentary evidence is required.
2053	1,2	Added NOTE that Former Foster Care Medicaid, Parent Caretaker, and

		Children Under 19 COAs were authorized as of 1/1/14, and that prior months are available under LIM and RSM regulations. Removed NOTE that stated a PgW A/R can be eligible for retroactive coverage without having an unpaid medical expense.
2060	3	Added Adult Medically Needy to COAs that require an interview.
2065	1,2,8	Changed name of LIM to Parent/Caretaker, changed RSM to Children Under 19, added streamlined application and COMPASS online application to list of acceptable applications Added statements that when removing the ROP penalty or adding a child back to an active AU once citizenship/identity verification is received, or when reinstating a MAGI case that close for failure to return verification, and the verification is returned within 90 days of the closure.
2067	1-3	Updated income limit and budgeting procedures for Presumptive Pregnancy Medicaid, updated forms that are included in the Presumptive packet.
2101	1	Updated MRWP/CHSS to NOW/COMP
2132	1	Updated MRWP/CHSS to NOW/COMP and added "or DMA-7" (only used for NOW/COMP) to second bullet.
2133	1,6	Removed "and younger" and replaced with "under", to read "children under 18". Updated DCH Commissioner name.
2143	1	Updated "QMB Resource

		Limit" to "the current QMB/SLMB/QI-1 resource limit"
2144	1	Updated "twice the SSI resource limit" to "the current QMB/SLMB/QI-1 resource limit"
2145	1	Updated "twice the SSI resource limit" to "the current QMB/SLMB/QI- 1 resource limit"
2160	1,2	Clarified which COA's are MAGI and non-MAGI, added FFM and COMPASS to list of places where applications are accepted, added "tax filer status" to list of basic eligibility criteria.
2162	1-3	Changed COA from LIM to Parent/Caretaker, added "tax filer" to list of basic eligibility criteria, changed age limit from "under 18" to "under 19", added statement that MAGI income is now used to determine eligibility.
2166	1-6	Changed all references from LIM to Parent/Caretaker, changed age limit

		from "under 18" to "under 19", changed all income limit references to MAGI.
2170	1-4	Changed all references from LIM to Parent/Caretaker, clarified that 4MEx is only for an increase in alimony or spousal support.
2172		Remove entire section
2174	4-5	Added statement that Newborn Medicaid should be approved back to the month of the child's birth. Removed statement that follow up with the parent/guardian is

		required to verify the child's living arrangements.
2182	1-4	Changed name and all references from RSM Child to Children Under 19, added MAGI budgeting to financial eligibility criteria, clarified that agency data sources should be first source for income verification.
2184	1-3	Changed name of section to Pregnant Women, updated new percentage of FPL, added statement that pregnancy no longer needs to be medically verified.
2186	1,214	Updated P4HB income limit, updated processing agent from PSI to MAXIMUS.
2194	1,3,4	Updated FPL limit, removed statement that PCK foster children are CMO exempt, updated the PCK premium chart.
2196	1,4,9	Changed all references from LIM to Parent/Caretaker, and RSM to Children Under 19, updated age limit from 18 to 19, added note that SD cases in suspense status should be closed with the correct code to refer to the FFM.
2201	1-6	Changed all references from LIM to Parent/Caretaker, updated age limit from 18 to 19, added statement to remove parent/caretaker from AU but not BG when reasonable opportunity period has expired and AU still has a qualifying child.
2205	1	Deleted first "NOTE".
2210	1,3	Added statement that Family Medicaid applications should not be

		delayed for proof of application for other benefits. Added statement about checking data sources and other programs prior to requesting verification
2215	4,11	Clarified NOTE that form 3231

		Immunization Certificate is acceptable as proof of identity for a child if an immunization date was documented before the child's 16 th birthday. Added COMPASS application and Single Streamlined Application to list of applications that don't require a separate DOC.
2220	1-5,8,10	Changed all references from LIM to Parent/Caretaker, and RSM to Children Under 19, updated contact info for getting an incorrect or validated SSN corrected in SUCCESS.
2225	2	Updated guidelines for determining residence for MAGI and non MAGI Family Medicaid COAs
2230	2,5	Added form 508COMPASS online application/renewal, single streamlined application, and presumptive applications to list of applications that include assignment of rights language. Updated address for Health Management Systems.
2245	1-3	Updated section with new MAGI tax filer and non tax filer rules
2250		Changed all references from LIM to Parent/Caretaker, and RSM to Children Under 19, removed exceptions about

		allowing a parent that doesn't comply to remain in the BG.
2255	1	Changed all references from LIM to Parent/Caretaker, and RSM to Children Under 19, updated age limit for Parent/Caretaker, TMA, 4MEx, FM-MN and Former Foster Care Medicaid
2316	2	Updated the home place equity value limit
2407	4-5	Removed bank fees from 2 nd bullet and changed three templates to two templates in step two.
2499	1-32	Updated to reflect how income is treated for MAGI COAs
2555	1-2	Removed the word "current" from the exception on bottom of page 1. Added "the A/R's monthly income and any other insurance payments must be taken into consideration when determining the IME"
2610	1-7	Added policy and procedures for MAGI BG/AU composition
2655	1,2	Added policy for MAGI income deductions, clarified that old FM
		deductions still apply for non-MAGI COAs, added statement that 30 + 1/3 is obsolete after 1/1/14 for non- MAGI COAs.
2663	1-2	Updated section with procedures for budgeting Non MAGI COAs.
2665		Remove entire section
2667	1-2	Changed LIM references to Parent/Caretaker, removed all references to allowing child care expenses in budgeting process. Added statement that data sources or other

		programs will be used to verify income before verification is requested.
2669	1-2	Updated section with MAGI budgeting procedures.
2706	1,6	Added note regarding processing cases as renewals if submitted within 90 days of renewal closure, no new application needed.
2818	2,3,4	Added statement that Chafee recipients will be enrolled with Amerigroup CMO, Updated SHINES and transfer procedures for Chafee cases, updated record retention procedures.
2819		Added new section for Former Foster Care Medicaid.
2932	Remove	Remove entire section.
2935	2	Updated NET provider contact info and counties served by each region.
2985	1	Updated WIC definition and products that are covered.
Appendix A-1	1-5	Added 2014 ABD Income/Resource Limits
Appendix A-2	1	Added 2014 Family Medicaid Income Limits
Appendix C	4	For non emergency SSI situations faxing the 962 was removed.
Appendix F		Added new Form 94A and its Appendices, Updated Form 216 and 218, Added LOC DMA-7, New QIT templates, and new 298Q for Q-Track/Senior SNAP renewals Deleted current QIT templates Updated QIT Worksheet, Updated QIT Trustee guide, Updated MIPPA Cover Letter, added newest HIPAA form in English and Spanish
Appendix G		Added MT47 Cover Letter
Main TOC		Updated to reflect

		changes referenced below
TOC 2100		Updated section names for 2162 and 2182, removed 2172
TOC 2200		Updated name of 2245
TOC 2600		Updated name of 2610
TOC 2650		Updated name of 2663 and 2669, removed 2665
TOC 2800		Added Section 2819
TOC 2900		Removed Section 2932