

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

DIVISION OF MEDICAID AND MEDICAL ASSISTANCE

Statutory Authority: 31 Delaware Code, Section 512 (31 Del.C. §512)

PROPOSED

PUBLIC NOTICE

Medical Assistance During Transition to Medicare Program

Attachment 2.2-A, Page 18 and

Supplement 6 to Attachment 2.6-A

DSSM 17800

In compliance with the State's Administrative Procedures Act (APA - Title 29, Chapter 101 of the **Delaware Code**) and under the authority of Title 31 of the **Delaware Code**, Chapter 5, Section 512, Delaware Health and Social Services (DHSS) / Division of Medicaid and Medical Assistance (DMMA) is proposing to amend the Title XIX Medicaid State Plan and the Division of Social Services Manual (DSSM) concerning covered groups of optional categorically needy individuals.

Any person who wishes to make written suggestions, compilations of data, testimony, briefs or other written materials concerning the proposed new regulations must submit same to Sharon L. Summers, Planning & Policy Development Unit, Division of Medicaid and Medical Assistance, 1901 North DuPont Highway, P.O. Box 906, New Castle, Delaware 19720-0906 or by fax to 302-255-4425 by September 30, 2008.

The action concerning the determination of whether to adopt the proposed regulation will be based upon the results of Department and Division staff analysis and the consideration of the comments and written materials filed by other interested persons.

SUMMARY OF PROPOSED AMENDMENT

The proposed amends the Title XIX Medicaid State Plan and the Division of Social Services Manual (DSSM) related to the Medical Assistance during Transition to Medicare Program. The reason for this amendment is to add coverage for a new optional categorically needy Medicaid population group.

Statutory Authority

42 CFR §435.232, *Individuals Receiving Only Optional State Supplements*

Background

The SSI Medical Assistance Transition (MAT) Program was implemented on March 1, 2001. This program was specifically designed to provide Medicaid coverage to SSI beneficiaries who lost SSI benefits (and consequently Medicaid eligibility) due to the receipt of Social Security Disability Income (SSDI) benefits. This extension of Medicaid coverage was made possible by establishing an Optional State Supplement program which satisfies federal requirements for Medicaid Federal Financial Participation (FFP). The Title XIX Medicaid State Plan defines this group as "*Individuals who lose SSI due to receipt of Social Security Disability Income and are not yet eligible for Medicare.*"

Summary of Proposed Amendment

The Medicaid State Plan and the Division of Social Services Manual (DSSM) will be amended to provide coverage to those individuals, not previously receiving SSI, who may be eligible for Medicaid based solely on income and who lose eligibility due to the receipt of Social Security Disability Income (SSDI), which exceed Medicaid eligibility guidelines. Effective September 1, 2008, eligibility would be for any individual who lost eligibility for Medicaid on or after January 1, 2008 due to the receipt of SSDI and does not have Medicare coverage.

yet eligible for Medicare.
Individuals who lose eligibility for
 Medicaid due to the receipt of Social
 Security Disability Insurance and are not
 yet eligible for Medical

(Break In Continuity of Sections)

Revision: HCFA-AT-85-3
 FEBRUARY 1985

SUPPLEMENT 6 TO
 ATTACHMENT 2.6-A

State: DELAWARE

Standards for Optional State Supplementary Payments

PAYMENT CATEGORY (REASONABLE CLASSIFICATION)	FEDERAL	STATE	INCOME		LEVELS		INCOME DISREGARDS EMPLOYED
			GROSS 1 Person	Couple	NET 1 Person	Couple	
(1)	(2)	(3)			(4)		(5)
Individuals Residing in Adult Foster Care Homes	X	SSI + \$140 + \$20			SSI + \$140		Disregards According to the SSI Program
Individuals Who Lose SSI Eligibility for Medicaid Due to Receipt of Social Security Disability Insurance and Are Not Yet Eligible for Medicare		X	\$5.00		\$5.00		All Income is Excluded

**DMMA PROPOSED REGULATION #08-39b
 REVISIONS:**

17800 Medical Assistance during Transition to Medicare

Under 42 CFR 435.232 Medicaid may be provided to individuals who receive only an optional State supplement and who would be eligible for SSI except for the level of their income.

The rules in this section set forth the eligibility requirements for coverage under this state-administered Optional State Supplementation group - Medical Assistance during Transition to Medicare (MAT). The MAT group is implemented ~~with the earliest effective date of February 1, 2004~~ March 1, 2001. Eligibility under this group is not retroactive.

17801 Status Eligibility

In addition to the general Medicaid eligibility requirements listed in DSSM 14000 - 44950.7 14960, the individual ~~meets all the conditions listed below~~ must meet the following conditions:

- a) received SSI, and
- b) ~~lost eligibility for SSI because of Social Security Disability~~ lost eligibility for SSI due to the receipt of Social Security Disability Insurance, and
- c) does not have Medicare coverage, ~~and~~
- d) ~~is not an inmate in a public institution. An individual is an inmate when serving time for a criminal offense or confined involuntarily in State or Federal prisons, jail, detention facilities, or other penal facilities. An individual awaiting trial in a detention center is considered an inmate of a public institution~~
- e) ~~an annual redetermination is completed. A redetermination is a re-evaluation of a recipient's continued eligibility for medical assistance. In a redetermination, all eligibility factors are re-examined to ensure that the recipient continues to meet categorical eligibility requirements. When a redetermination is due, the recipient is required to complete and return a new DSS application form. A redetermination is complete when all eligibility factors are examined and a decision regarding continued eligibility is reached.~~

Effective September 1, 2008, coverage under the MAT group is extended to an individual who:

- a) lost eligibility for Medicaid on or after January 1, 2008, due to the receipt of Social Security Disability Insurance, and
- b) does not have Medicare coverage.

17802 Financial Eligibility

All income and resources are excluded.

17803 Eligibility Determination

~~DSS will receive the names of individuals who lose SSI via the monthly State Data Exchange (SDX). When an individual loses Medicaid eligibility because of the loss of SSI, Federal regulations require a redetermination of Medicaid eligibility based upon information obtained through the SDX file. A new application is not required. The SSI Unit will use the information obtained from the SDX to redetermine Medicaid eligibility.~~

When an individual loses Medicaid eligibility, a redetermination will be completed to the extent possible based on information contained in the individual's file. An application form may be required if additional or updated information is needed for the redetermination.

17804 Income Standard

The income standard is \$5.00.

17805 Payment Level

Countable income is deducted from the income standard.

12 DE Reg. 284 (09-01-08) (Prop.)