

Take Action on Package

MEDICAID | Medicaid State Plan | Eligibility | LA2018MS00080 | LA-18-0027

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Package Information

Package ID	LA2018MS00080	Submission Type	Official
Program Name	N/A	State	LA
SPA ID	LA-18-0027	Region	Dallas, TX
Version Number	2	Package Status	RAI
Submitted By	MARJORIE JENKINS	Submission Date	12/13/2018
		RAI Period	88 days remain Awaiting State Response
		Review Status	RAI

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Audit Information

Created By	MARJORIE JENKINS	Updated By	Cheryl Rupley
Created Date	12/4/2018 6:16 PM EST	Updated Date	3/12/2019 8:26 AM EDT

Instructions

From Cheryl Rupley

Instructions We are requesting this additional/clarifying information under provisions of section 1915(f) of the Social Security Act (added by PL 97-35). This has the effect of stopping the 90-day clock for CMS to take action on the material, which would have expired on March 13, 2019. A new 90-day clock will not begin until we receive your response to this request.

In accordance with our guidelines to all State Medicaid directors dated January 2, 2001, and subsequently reiterated in the August 16, 2018 Center for Medicaid and CHIP Services Informational Bulletin, if a response to a formal request for additional information from CMS is not received from the state within 90 days of issuance, CMS will initiate disapproval of the SPA or waiver action. In addition, because this amendment was submitted after January 2, 2001 and is effective after January 1, 2001, please be advised that we will defer federal financial participation (FFP) for state payments made in accordance with this amendment until it is approved. Upon approval, FFP will be available for the period beginning with the effective date through the date of approval. We ask that you respond to this RAI via the Dallas Regional Office SPA/Waiver e-mail address at CMS SPA_Waivers_Dallas_R06. The original signed response should also be sent to the Dallas Regional Office.

Choose Action

Available Workflow Actions *

- Modify the Returned Submission Package
- Return Submission Package to State Editor for Revision
- Submit RAI Response to CMS

Instructions

[RETURN TO PACKAGE TASK](#)

[EXECUTE ACTION](#)

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Question ID	Reference	CMS question to the State	Policy/Regulation	State's Response
1	The agency may request a non-applicant's SSN if clear notice is provided that provision of the non-applicant's SSN is voluntary. A state agency is required to assist only applicants with applying for an SSN.	The question about whether a person applied for an SSN appears to be mandatory. Please confirm. Individuals who are not seeking coverage should not be required to answer the question.	42 CFR 435.907(e)(3)(i); 42 CFR 435.910(e)(1)	
2	Applicants may only be asked to provide information necessary to make an eligibility determination	Please confirm whether the address question is required for individuals who are homeless. Those without a fixed address should be required to enter a mailing address (as already included in the next section), but a home address should not be required.	42 CFR 435.907(e)(1)	
3	Applicants may only be asked to provide information necessary to make an eligibility determination	Please clarify whether the each of the detailed options for marital status is needed for eligibility. For example, the drop-downs ask for single-never married, divorced, and widowed. Does the system use responses to these questions differently?	42 CFR 435.907(e)(1)	
4	Applicants may only be asked to provide information necessary to	Please clarify how each of the responses in the "living arrangement" drop-down are used. Is there logic behind the	42 CFR 435.907(e)(1)	

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	make an eligibility determination	responses to trigger specific questions or influence eligibility?		
5	Applicants may only be asked to provide information necessary to make an eligibility determination	Please clarify how the question about whether a person moved in the last 12 months is used for Medicaid/CHIP?	42 CFR 435.907(e)(1)	
6	States must identify American Indians and Alaska Natives who may be eligible for cost-sharing exemptions and income deductions for Medicaid/CHIP, SEPs and CSRs for QHPs on the Marketplace.	Because race/ethnicity questions are optional, American Indians and Alaska Natives who may be exempt from cost sharing or eligible for special enrollment periods for Marketplace coverage may not identify themselves. Please provide a separate non-optional question that asks about AI/AN status, with explanatory text about how that information will be used. The state also allows exemption for premium based programs. CMS understands that a supplemental form is used to collect this data and that since the form is only invoked for the premium programs, the state will consider updating this in a future release and/or adding help text. Are there any updates available?	42 CFR 447.56, 435.603(e)	
7	The agency must verify citizenship and immigration status through electronic services, and request and	The application does not ask if the individual/applicant is a Naturalized or derived US citizen. This information is needed because these individuals may need to be verified with the	42 CFR 435.956(a) 42 CFR 435.945(b)	

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	use information relevant to verifying eligibility.	Department of Homeland Security’s SAVE verification system, and may not always be verified with SSA. For this reason, the flow should allow a Naturalized or derived US citizen to provide a Certificate number and alien number, and these individuals do not need to answer the remaining questions under “Citizenship Information.”		
8	The agency must verify citizenship and immigration status through electronic services, and request and use information relevant to verifying eligibility.	The application does not ask if the individual/applicant is attesting to having an eligible immigration status, which is required before requesting immigration status and/or immigration document number. For individuals who do not attest to having an eligible immigration status, the questions under “Citizenship Information” should not appear. However, individuals applying for coverage of an emergency condition only may be in a valid immigration status (i.e., a qualified non-citizen), but not have an eligible status for Medicaid (e.g., a lawful permanent resident in the 5 year bar waiting period).	42 CFR 435.956(a)(2) 42 CFR 435.945(b)	
9	The agency must verify citizenship and immigration status	There is no question on this screen asking for an individual’s document number. The	42 CFR 435.956(a)(2) 42 CFR 435.945(b)	

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	through electronic services, and request and use information relevant to verifying eligibility.	Department of Homeland Security needs this information in order to verify the individual’s immigration status.		
10	The agency must verify citizenship and immigration status through electronic services.	The question asking for an individual’s “Immigration Grant Date” is confusing to applicants who may not understand what is being requested. Furthermore, it is the Department of Homeland Security that provides the grant date for qualified non-citizens if requested as it may be needed to determine if an individual has met the five year waiting period.	42 CFR 435.956(a)(2)	
11	The agency must determine if an individual is a veteran described at 8 USC 1613.	This section is missing a question asking “are you, or your spouse or parent, a veteran or an active-duty member of the US military?” This question is needed to determine if the applicant may be exempt from the 5 year waiting period (see also comments to the list of immigration statuses, below at comment 13).	42 CFR 435.956(a)(3) 42 CFR 435.945(b)	

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12	The list of eligible immigration statuses should be comprehensive so an individual can select a status from the dropdown list. The agency must request and use information relevant to verifying eligibility.	Comments to the list of immigration statuses: Please change “Spouse/Child of Battered Alien” to the actual immigration status, which is “Battered spouse, child or parent. Change “Victim of trafficking” to “Victim of trafficking and his/her spouse, child, sibling or parent.” Change “deportation withheld” to “Granted withholding of deportation or removal” Please. Change “Conditional Entry” to “Conditional Entrant” Please remove “Qualified Alien since this is not an immigration status.	42 CFR 435.956(a)(2); 42 CFR 435.945(b)	
13	Some of the items on the dropdown list are not eligible immigration statuses and should be removed since applicants may only be asked to provide information necessary to make an eligibility determination	Remove “Undocumented Aliens” from this list of eligible immigration statuses. Please remove all references to veterans or their family members from this list since these are not immigration statuses. See question 11, above for instructions on how to capture this information, and why it is needed on the application. remove “SDX/None/Unknown, since this is not an immigration status	42 CFR 435.907(e)(1) 42 CFR 435.945(b)	
14	The list of eligible immigration statuses should be comprehensive so an individual can	The state may wish to remove some of the less common non-immigrant statuses from this list (e.g., Member of the Foreign	42 CFR 435.956(a)(2); 42 CFR 435.945(b)	

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	<p>select a status from the dropdown list. The agency must request and use information relevant to verifying eligibility</p>	<p>Media, Crewman on Shore leave, International Organization Rep. and Family), and replace them with more commonly used non-immigrant statuses, such as “Individual with Non-immigrant Status, includes worker visas (such as H1, H-2A, H-2B), student visas, U-visa, T-visa, and other visas, and citizens of Micronesia, the Marshall Islands, and Palau; Temporary Protected Status (TPS); Deferred Enforced Departure (DED).”</p>		
15	<p>States that elect the option to provide coverage lawfully residing immigrants must verify the individual meets that definition according to the rules at 1137(d), and must request and use information relevant to verifying eligibility.</p>	<p>Because the state is electing the option to cover lawfully present children under age 19 in Medicaid and CHIP (LA SPAs 19-0009 and 19-0010), the list of eligible statuses should include a complete list of qualified non-citizen and lawfully present non-citizen statuses listed in those SPAs. Please see also the CMS State health Official Letter for a list of lawfully present statuses: https://downloads.cms.gov/cmsgov/archived-downloads/SMDL/downloads/SHO10006.pdf</p>	<p>42 CFR 435.956(a)(2) 42 CFR 435.945(b)</p>	

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16	Applicants may only be asked to provide information necessary to make an eligibility determination	It appears that applicants are asked whether they are “aged” in the section on disability status in a question asking what type of condition a person has. It is likely that individuals may not consider themselves as having a condition if they are aged. Additionally, the application would have collected each applicant’s age earlier on. Are questions about aged individuals needed in this section at all?	42 CFR 435.907(e)(1)	
17	Applicants may only be asked to provide information necessary to make an eligibility determination	If an individual has attested to having a disability, would it appear that they are asked a follow-up question about other potential disabilities. If this question is only used as a screening tool for non-MAGI, are the follow-up questions about additional disabilities required?	42 CFR 435.907(e)(1)	
18	Applicants may only be asked to provide information necessary to make an eligibility determination	Detailed information about offers of employer sponsored health coverage is not needed for individuals potentially eligible for Medicaid/CHIP. Please clarify whether the questions in this section, beyond those needed for TPL, are asked of all applicants or only those screened as potentially eligible for APTC? The state indicated that this data is needed to determine if an	42 CFR 435.907(e)(1)	

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		<p>individual is eligible under the Family Opportunity Act program and also is used for the HIPP program, referral process. In order to meet the dynamic functionality requirement, these questions should only be asked of applicants who appear to be eligible under the Family Opportunity Act program. The state indicated that they could add questions to screen for FOA program, and therefore be able to show ESC questions dynamically.</p>		
19	<p>Applicants may only be asked to provide information necessary to make an eligibility determination</p>	<p>Please clarify how the “out-of-state” options in the other coverage drop-down menu are used. Are they used to identify potential residency inconsistencies or duplicate coverage?</p>	42 CFR 435.907(e)(1)	
20	<p>Applicants may only be asked to provide information necessary to make an eligibility determination</p>	<p>Income Types-</p> <ol style="list-style-type: none"> 1. SSI and VA Benefits are non-taxable income not counted in determining Medicaid/CHIP MAGI-based income. Non-taxable Social Security benefits are counted in determining Medicaid/CHIP MAGI-based income. 2. The state may only ask for income types that are countable under MAGI, which generally are 	42 CFR 435.907(e)(1)	

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		just taxable income as well as non-taxable Social Security, foreign earned income and non-taxable interest.		
21	Applicants may only be asked to provide information necessary to make an eligibility determination	Per 42 CFR 435.907 (e) (1), applicants may only be asked to provide information necessary to make an eligibility determination for MAGI, unless the individual answers yes to one of the non-MAGI screening questions. If so, the additional questions must still be optional to permit applicants to receive a determination while they provide additional information. Please confirm that these questions are only asked of individuals who are potentially eligible for Medicaid on a non-MAGI basis and that applicants can complete and submit the application without answering these questions?	42 CFR 435.907(e)(1)	
22	Please provide updated screenshots showing the help text that is provided to applicants.	In including questions about managed care enrollment as part of the application, we also recommend that the state provide clear notice to applicants as follows: That the plan selection will not be utilized if the applicant is determined eligible for coverage through the Health Insurance	42 CFR 438.10	

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		<p>Marketplace, and the applicant will need to enter a new plan selection process if that occurs. We understand that clarifying text will be considered for a future release.</p> <p>The state confirmed that if an applicant does not select a plan in the initial application process, eligible individuals who do not select a plan will be automatically enrolled and that this information is part of help text.</p>		
23	General	<p>CMS understands that Louisiana will start using IRS to verification income for Medicaid/CHIP and will update this language to ask for consent to use the data at renewal for Medicaid and CHIP as well as for the FFE. If accurate, please clarify when this change will be implemented.</p>	42 CFR435.916	

APPENDIX

When the Document Type selected is “Employment Authorization” following additional details are requested from client:

CITIZENSHIP INFORMATION

* Is this person a U.S. citizen or U.S. national?

* Immigration Status:

* Document Type:

* Date of Entry:

Immigration Grant Date:

* Expiration Date:

* Alien Number:

* Card Number:

Is the person's name that is listed above the same name that appears on their document?

When the Document Type selected is “Machine Readable Immigration Visa” following additional details are requested from client

CITIZENSHIP INFORMATION

* Is this person a U.S. citizen or U.S. national?

* Immigration Status: * Document Type:

* Date of Entry: * Passport or Document Number:

Immigration Grant Date: * Country of Issuance:

* Alien Number:

Is the person's name that is listed above the same name that appears on their document?

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Immigration Status Drop-Down Values in LaMEDs Self-Service Portal

The screenshot shows a web browser window with the URL <https://sspweb.ust.ee.la.gov/ssuat/selfservice/selfserviceController?tid=0.217>. The browser tabs include "Mail - subsharma@deloitte", "WSP", "SSP", "IVAANTI", "JIRA", and "LA E&E - Self Service Portal". The page content is a form titled "LIVING ARRANGEMENT" with a dropdown menu for "What is this person's living arrangement?". Below this is the "RELOCATION INFORMATION" section with a question "Has this person moved to Louisiana in the last 12 months?". The "CITIZENSHIP INFORMATION" section includes a question "Is this person a U.S. citizen or U.S. national?" and an "Immigration Status:" dropdown menu. The "ETHNICITY" section has checkboxes for "Puerto Rican", "Cuban", and "Chicano/a". The "Immigration Status:" dropdown menu is open, showing a list of options: American Indian's born in Canada (50%+), Spouse/Child of Battered Alien, Current spouse of a veteran, Lawful Permanent Resident, Amerasian Immigrant, Parolee, Victim of Trafficking, Undocumented Aliens, Un Married child of a veteran, Asylee, Cuban/Haitian Entrant, Active duty member of the U.S. Armed Forces, Un Married child of an active duty member of USAF, Un remarried widow of a veteran, Deportation Withheld, Current spouse of an active duty member of USAF, Refugee, SDX None/Unknown, Conditional Entry, Afghani / Iraqj Special Immigrant, Honorably discharged Veteran, Qualified Alien, Foreign Diplomat and Diplomat Families, Visitors / Tourists, Crewman on Shore Leave, Foreign Student, International Organization Rep. and Family, Temporary Worker, Member of Foreign Media, and Other Non-Immigrant. The system tray at the bottom right shows the time as 7:43 PM on 3/12/2019.

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The screenshot shows a web browser window with the URL <https://sspweb.uat.ee.la.gov/auat/selfservice/selfserviceController?id=0.217>. The browser tabs include "Certificate error", "[EE-46527] EEMEDS-5C001 on...", and "LA EB&E - Self Service Portal". The browser's address bar shows "Mail - subsharma@deloitte", "WPA", "SSP", "IVAANTI", and "JIRA".

The form content is as follows:

- LIVING ARRANGEMENT**
 - * What is this person's living arrangement?
- RELOCATION INFORMATION**
 - Has this person moved to Louisiana in the last 12 months?
- CITIZENSHIP INFORMATION**
 - * Is this person a U.S. citizen or U.S. national?
 - * Immigration Status:
 - * Date of Entry:
 - Immigration Grant Date:
- ETHNICITY**
 - If this person is of Hispanic, Latino, or Spanish descent:
 - Puerto Rican
 - Cuban
 - Chicano/a

The dropdown menu for Immigration Status is open, showing the following options:

- Enrolled member of an Indian Tribe
- American Indian's born in Canada (50%+)
- Spouse/Child of Battered Alien
- Current spouse of a veteran
- Lawful Permanent Resident
- Amerasian Immigrant
- Parolee
- Victim of Trafficking
- Undocumented Aliens
- Un Married child of a veteran
- Asylee
- Cuban/Haitian Entrant
- Active duty member of the U.S. Armed Forces
- Un Married child of an active duty member of USAF
- Un remarried widow of a veteran
- Deportation Withheld
- Current spouse of an active duty member of USAF
- Refugee
- SDX None/Unknown
- Conditional Entry
- Afghani / Iraqi Special Immigrant
- Honorably discharged Veteran
- Qualified Alien
- Foreign Diplomat and Diplomat Families
- Visitors / Tourists
- Crewman on Shore Leave
- Foreign Student
- International Organization Rep. and Family
- Temporary Worker