

### **Medicaid Eligibility**

OMB Control Number 0938-1148

2	OMB Expiration date: 10/31/20
Eligibility Groups - Options for Coverage Reasonable Classification of Individuals under Age 21	S
42 CFR 435.222 1902(a)(10)(A)(ii)(I) 1902(a)(10)(A)(ii)(IV)	
Reasonable Classification of Individuals under Age 21 - The state elects to cover one or more reasonable age 21 who are not mandatorily eligible and who have income at or below a standard establishe with provisions described at 42 CFR 435.222.	
● Yes ← No	
The state attests that it operates this eligibility group in accordance with the following provision	ons:
Individuals qualifying under this eligibility group must qualify under a reasonable classi criteria:	fication by meeting the following
■ Be under age 21, or a lower age, as defined within the reasonable classification.	
Have household income at or below the standard established by the state, if the state reasonable classification.	has an income standard for the
■ Not be eligible and enrolled for mandatory coverage under the state plan.	
MAGI-based income methodologies are used in calculating household income. Please re Based Income Methodologies, completed by the state.	efer as necessary to S10 MAGI-
The state covered at least one reasonable classification under this eligibility group under its N 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 20 (including disregarding all income) than the current mandatory income standards for the indi	013, with income standards higher
The state also covered at least one reasonable classification under this group in the Medicaid with income standards higher (including disregarding all income) than the current mandatory individual's age.	아ુ선 10mm (10mm) # 10mm (10mm) 전 10mm) 전 10mm (10mm) 전 10mm (10mm) 전 10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm) 전 10mm(10mm) 전 10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm (10mm) 전 10mm) 전 10mm(10mm) 전 10mm (10mm) 전 10mm)
€ Yes ○ No	
Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010	
The state attaches the approved pages from the Medicaid state plan as of March groups, reasonable classifications, and income standards used at that time for this	23, 2010 to indicate the age is eligibility group.
An attachment is submitted.	
Current Coverage of All Children under a Specified Age	

Approval Date: Effective Date: 1-1-14 TN: 13-49 3-6-14

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The state covers all children under a specified age limit, equal to or higher than the age limit and/or income standard used in the Medicaid state plan as of March 23, 2010, provided the income standard is higher than the current mandatory income standard for the individual's age. The age limit and/or income standard used must be no higher than any age limit and/or income standard covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income. C Yes @ No Current Coverage of Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010 The state covers reasonable classifications of children previously covered in the Medicaid state plan as of March 23, 2010, with income standards higher than the current mandatory income standard for the age group. Age limits and income standards are equal to or higher than the Medicaid state plan as of March 23, 2010, but no higher than any age limit and/or income standard for this classification covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income. Yes ○ No Indicate the reasonable classifications of children that were covered in the state plan in effect as of March 23, 2010 with income standards higher than the mandatory standards used for the child's age, using age limits and income standards that are not more restrictive than used in the state plan as of as March 23, 2010 and are not less restrictive than used in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Current Coverage of Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010 Reasonable Classifications of Children S11 Individuals for whom public agencies are assuming full or partial financial responsibility. Indicate the age which applies: ● Under age 21 Under age 20 Under age 19 Under age 18 Individuals placed in foster care homes by private, non-profit agencies Individuals placed in private institutions by public agencies Indicate the age which applies: ● Under age 21 Under age 20 Under age 19 Under age 18 Individuals placed in private institutions by private, non-profit agencies Individuals in adoptions subsidized in full or part by a public agency Individuals in nursing facilities, if nursing facility services are provided under this plan Individuals receiving active treatment as inpatients in psychiatric facilities or programs,

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if such services are provided under this plan

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	☐ Other reasonable classifications
star 201	the the income standard used for these classifications. The income standard must be higher than the mandatory induced for the child's age. It may be no lower than the income standard used in the state plan as of March 23, 10 and no higher than the highest standard used in the Medicaid state plan as of December 31, 2013 or under a dicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.
	Click here once S11 form above is complete to view the income standards form.
Inc	dividuals placed in foster care homes by public agencies
	Income standard used
	■ Minimum income standard
	The minimum income standard for this classification of children is the AFDC payment standard in effect as of July 16, 1996, not converted to MAGI-equivalent. This standard is described in S14 AFDC Income Standards.
	■ Maximum income standard
	No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.
	<ul> <li>✓ Yes</li></ul>
	An attachment is submitted.
	The state's maximum income standard for this classification of children (which must exceed the minimum for the classification) is:
	The state's effective income level for this classification of children under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
	The state's effective income level for this classification of children under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
	The state's effective income level for this classification of children under a Medicaid 1115  Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

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	The state's effective income level for this classification of children under a Medicaid 1115  Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
	Enter the amount of the maximum income standard:
	A percentage of the federal poverty level: %
	The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.
	The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.
	Other dollar amount
■ Inc	ome standard chosen
Inc	dividuals qualify under this classification under the following income standard:
$\subset$	The minimum standard.
(•	The maximum income standard.
C	If not chosen as the maximum income standard, the state's effective income level for this classification under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
C	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
C	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
C	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI equivalent percent of FPL or amounts by household size.
C	Another income standard in-between the minimum and maximum standards allowed, provided it is higher than the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.

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#### ■ Income standard used

### ■ Minimum income standard

The minimum income standard for this classification of children is the AFDC payment standard in effect as of July 16, 1996, not converted to MAGI-equivalent. This standard is described in S14 AFDC Income Standards.

#### ■ Maximum income standard

No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

C Yes @ No

The state certifies that it has submitted and received approval for its converted income standards for this classification of children to MAGI-equivalent standards and the determination of the maximum income standard to be used for this classification of children under this eligibility group.

#### An attachment is submitted.

The state's maximum income standard for this classification of children (which must exceed the minimum for the classification) is:

- The state's effective income level for this classification of children under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under the Medicaid state plan
  as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by
  household size.
- The state's effective income level for this classification of children under a Medicaid 1115
   Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under a Medicaid 1115

  Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Enter the amount of the maximum income standard:

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	A percentage of the federal poverty level: %							
	The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.							
	The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.							
	Other dollar amount							
■ Inco	ome standard chosen							
Inc	ividuals qualify under this classification under the following income standard:							
C	The minimum standard.							
•	The maximum income standard.							
0	If not chosen as the maximum income standard, the state's effective income level for this classification under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.							
0	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.							
О	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.							
О	If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.							
C	Another income standard in-between the minimum and maximum standards allowed, provided it is higher than the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.							
Other Reaso	nable Classifications Previously Covered							
The state co	vers reasonable classifications of children <u>not</u> covered in the Medicaid state plan as of March 23, 2010, but er the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March December 31, 2013 with an income standard higher than the current mandatory income standard for the age							

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Yes ○ No

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The additional previously covered reasonable classifications to be included are: Additional Previously Covered Reasonable Classifications Included Reasonable Classifications of Children S11 Individuals for whom public agencies are assuming full or partial financial responsibility. Individuals in adoptions subsidized in full or part by a public agency Individuals in nursing facilities, if nursing facility services are provided under this plan Individuals receiving active treatment as inpatients in psychiatric facilities or programs, if such services are provided under this plan Other reasonable classifications Name of classification Description Age Limit Pregnant teens Pregnant teens Under age 19 Enter the income standard used for these classifications (which must be higher than the mandatory standard for the child's age but may be no higher than the highest standard used in the state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013). Click here once \$11 form above is complete to view the income standards form. Pregnant teens Income standard used ■ Minimum income standard The minimum income standard for this classification of children must exceed the lowest income standard chosen for children under this age under the Infants and Children under Age 19 eligibility group. ■ Maximum income standard No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Yes ○ No No income test was used (all income was disregarded) for this classification under: (check all that apply) ☐ The Medicaid state plan as of March 23, 2010. ∑ The Medicaid state plan as of December 31, 2013. A Medicaid 1115 Demonstration as of March 23, 2010.

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г	7 4	Medicaid	1115	Demonstration a	ac of I	December 31	2013

The state's maximum standard for this classification of children is no income test (all income is disregarded).

■ Income standard chosen

Individuals qualify under this classification under the following income standard:

- This classification does not use an income test (all income is disregarded).
- Another income standard higher than both the minimum income standard and the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.

#### Additional new age groups or reasonable classifications covered

If the state has <u>not</u> elected to cover the Adult Group (42 CFR 435.119), it may elect to cover additional new age groups or reasonable classifications that have not been covered previously. If the state covers the Adult Group, this additional option is not available, as the standard for the new age groups or classifications is lower than that used for mandatory coverage.

The state does <u>not</u> cover the Adult Group and elects the option to include in this eligibility group additional age groups or reasonable classifications that have not been covered previously in the state plan or under a Medicaid 1115 Demonstration. Any additional age groups or reasonable classifications not previously covered are restricted to the AFDC income standard from July 16, 1996, not converted to a MAGI-equivalent standard.

C Yes @ No

There is no resource test for this eligibility group.

### PRA Disclosure Statement

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-1148. The time required to complete this information collection is estimated to average 40 hours per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.

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