

ATTACHMENT A

TexKat Title XIX Waivers and Requirements Not Applicable to the Demonstration

1. Statewideness—Section 1902(a)(1)

To enable the Host State to implement a program to provide benefits to evacuees who are determined to be eligible under a Home State Medicaid program on less than a Statewide basis.

2. Comparability—Section 1902(a)(10)(B)

To enable Host States to offer benefits to evacuees that are not comparable to the benefits offered by the Home or Host States to categorically needy individuals or to other individuals in the same eligibility group.

3. Fair Hearings and Notices—Section 1902(a)(3)

To enable a Host State to make determinations of temporary eligibility status for a period of up to 5 months without according the right to fair hearings or appeals of adverse determinations that would be available for determinations with respect to eligibility status under the State plan. Nothing in this waiver limits the rights of such individuals to seek a determination of permanent eligibility status in the Home State with the right to fair hearings or appeals of adverse determinations.

4. Cooperation in Establishing Paternity—Section 1902(a)(45)

To permit the Host State to determine eligibility for evacuees under the Home State program without requiring applicants to comply with paternity cooperation requirements of section 1912.

5. Freedom of Choice—Section 1902(a)(27)

To enable the Host State to restrict the choice of provider.

6. Provider Agreements—Section 1902(a)(32)

To permit the provision of care in the Host State by individuals or entities who have not executed a Provider Agreement with the Home State Medicaid Agency but have such an agreement with the Host State.

7. Annual Redeterminations of Eligibility—Sections 1902(a)(4) and 1902(a)(19)

To permit delay of otherwise required redeterminations between August 24, 2005 and January 31, 2006, for evacuees enrolled in the Host State's title XIX program. At the Host State's option, current enrollees in title XIX program not considered evacuees who are due for recertification between September 30, 2005 and January 31, 2006 will have their enrollment period extended.

8. Amount, Duration, and Scope—Section 1902(a)(10)(B)

To permit the provision of different services to evacuees within the Host State than to other populations in either the Home or Host States.

9. Retroactive Eligibility—Section 1902(a)(34)

To enable the Host State to waive the requirement to provide medical assistance for up to three months prior to the date that application for assistance under a temporary eligibility period is made for evacuees.

10. Staff to Determine Eligibility—Section 1902(a)(5)

To enable the Host State to use non-merit staff to determine eligibility for evacuees.

11. Comparability of Eligibility—Section 1902(a)(17)

To enable the Host State to determine financial eligibility without using the income and resource methodologies of the AFDC or SSI programs.

12. Third Party Liability—Section 1902(a)(25)

To waive the requirement that the Host State collect sufficient information about third party liability at the time of any determination or redetermination of eligibility, if such collection is not possible at that time.

Title XXI Waivers

1. Eligibility Screening—Section 2102(a)

The State child health plan of the Host State does not have to reflect the evacuee population. The title XXI simplified eligibility requirements will be applied to the evacuee population. The eligibility rules that apply to the SCHIP evacuee category are described in the Special Terms & Conditions.

2. Eligibility Screening—Section 2103(a)

The title XXI income eligibility guidelines of Mississippi, Louisiana, Alabama, and Florida or the simplified eligibility chart criteria will be followed when enrolling evacuee children from these States.

3. Annual Reporting Requirements—Section 2108

To permit not applying annual reporting requirements to this evacuee population.

4. Annual Redeterminations—Section 2102

To permit delay of otherwise required annual redeterminations for the Home/Host State's title XXI program between August 24, 2005, and January 31, 2006, living in affected areas of Mississippi, Louisiana, Alabama, and Florida who were displaced by Hurricane Katrina.

TexKat Medicaid Costs Not Otherwise Matchable

Under the authority of section 1115(a)(2) of the Act, State expenditures under the TexKat demonstration described below (which would not otherwise be included as matchable expenditures under section 1903) shall, for the period of the project, be regarded as expenditure under the State's title XIX plan. All requirements of the Medicaid statute will be applicable to such expenditures, except those specified below as not applicable to these expenditure authorities. In addition, all requirements in the enclosed Special Terms and Conditions will apply to these expenditure authorities.

- 1.** Host State expenditures including administrative and benefit costs of extending benefits during a temporary eligibility period to evacuees who fit into the demonstration population consisting of parents, pregnant women, children under age 19, individuals with disabilities, low income Medicare recipients, and low income individuals in need of long term care with incomes up to and including the levels listed on the attached chart are determined to be eligible under a Host State Medicaid program.

2. Expenditures for Home and Community Based Services including administrative and benefit costs.
3. All expenditures for services provided to individuals who meet the level of need for nursing facility services between the ages of 22 and 65 temporarily residing in an Institution for Mental Diseases (IMD) because of the hurricane, and for payments to other beneficiaries who reside in facilities that would not be an (IMD) if not for the placement of evacuees with mental disease.
4. All expenditures for medical services provided to individuals who are receiving inpatient psychiatric services under the TexKat demonstration project in freestanding facilities.
5. All Expenditures for Long-Term Care services for individuals who need Intermediate Care Facility/Mental Retardation (ICF/MR) or Nursing facility services when those services must be provided temporarily in an alternate setting and/or by alternate providers because providers in the area have reached capacity. The state must approve the alternate settings and alternate providers and periodically assess the health status of these individuals.
6. Expenditures for all title XIX contract requirements, which require providers to meet existing licensure requirements. However, institutional settings must meet local fire marshal requirements.
7. Expenditures for nursing facility that temporarily admit more than 50 percent of its population whose primary diagnosis is mental health. The nursing facility is not at risk of being classified as an IMD and loses its Medicaid certification and funding.
8. Expenditures, from the date of service, for individual evacuees who need community care services, such as Community Attendant Services, Primary Home Care and Day Activity and Health Services, for which a physician's statement as to eligibility for these programs has been given or will be obtained, in lieu of functional eligibility assessment.

TexKat SCHIP Costs Not Otherwise Matchable

In addition, under the authority of section 1115(a)(2) of the Act as incorporated into title XXI by section 2106(e)(2)(A) of the Act, State expenditures described below (which would not otherwise be included as matchable expenditures under title XXI), shall for the period of this project and to the extent of the home State's available allotment under section 2104 of the Act, be regarded as matchable expenditures under the State's title XXI plan. All requirements of the title XXI statute will be applicable to such expenditures, except specified below as not applicable to these expenditure authorities. In addition, all requirements in the enclosed Special Terms and Conditions will apply to these expenditure authorities.

1. Host State expenditures including both administrative and benefit costs of extending benefits during a temporary eligibility period to evacuees who are determined to be eligible under a Home State SCHIP program.
2. To permit Federal matching payment for the provision of medical assistance on behalf of a child during a temporary eligibility period that is not implemented in accordance with section 1920A.

The State will establish a process to ensure that demonstration expenditures do not exceed the State's available title XXI funding.

No Federal funding for any State programs or for participants not income-eligible according to the Special Terms and Conditions.

ATTACHMENT B

Evacuee Eligibility Simplification Based on Home State Eligibility Rules

<u>Simplified Eligibility Groups</u>	<u>FPL Levels</u>
Children Under Age 19	up to and including 200% FPL
Pregnant Women from Louisiana and Mississippi	up to and including 185% FPL
Pregnant Women from Alabama	up to and including 133% FPL
Individuals with Disabilities	up to and including 300% SSI
Low income Medicare Recipients	up to and including 100% FPL
Low-income Individuals in need of Long Term Care	up to and including 300% SSI
Low-income Parents of Children Under Age 19	up to and including 100% FPL