STATE OF RHODE ISLAND EXECUTIVE OFFICE OF HEALTH AND HUMAN SERVICES

05/30/2023 PUBLIC NOTICE OF PROPOSED AMENDMENT TO RHODE ISLAND MEDICAID STATE PLAN

In accordance Rhode Island General Laws 42-35, notice is hereby given that the Executive Office of Health and Human Services (EOHHS) proposes to make the following amendment to the Rhode Island State Plan under Title XIX of the Social Security Act:

Medicare Premium Payment Program

EOHHS is seeking approval from the Centers for Medicare and Medicaid Services (CMS) to update the State Plan pages to align eligibility requirements for the Medicare Premium Payment Program with federal law. The Medicare Premium Payment Program covers Medicare premiums, co-payments, and deductibles for individuals with limited income and resources. This is a technical amendment and is consistent with current state practice.

There is no estimated fiscal impact from this change.

This proposed amendment is accessible on the EOHHS website (www.eohhs.ri.gov) or available in hard copy upon request (by calling 401-462-2407 or RI Relay, dial 711). Interested persons should submit data, views, or written comments by June 29, 2023 to Brittany Church, Executive Office of Health and Human Services, 3 West Road, Cranston, RI, 02920, or Brittany.Church@ohhs.ri.gov or via phone at (401) 462-2407.

In accordance with the Rhode Island General Laws 42-35-3, an oral hearing will be granted on the proposed State Plan Amendment if requested by twenty-five (25) persons, an agency, or by an association having at least twenty-five (25) members. A request for an oral hearing must be made within ten (10) days of this notice.

The Executive Office of Health and Human Services does not discriminate against individuals based on race, color, national origin, sex, gender identity or expression, sexual orientation, religious belief, political belief, or handicap in acceptance for or provision of services or employment in its programs or activities.

Original signed by Richard Charest, Secretary, Rhode Island Executive Office of Health and Human Services
Signed this 30th day of May, 2023

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Individuals with income equal to or less than 100% of the FPL, who are entitled to Medicare Part A, and who qualify for Medicare cost-sharing.

Package Header

 Package ID
 RI2023MS0003O
 SPA ID
 RI-23-0006

 Submission Type
 Official
 Initial Submission Date
 N/A

 Approval Date
 N/A
 Effective Date
 4/1/2023

Superseded SPA ID RI-93-005
User-Entered

The state covers the mandatory qualified Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

 $Individuals\ qualifying\ under\ this\ eligibility\ group\ must\ meet\ the\ following\ criteria:$

- 1. Are entitled to hospital insurance benefits under part A of title XVIII (Medicare Part A), including individuals who have purchased a premium to enroll in Part A.
- 2. Have income and resources at or below the standard for this group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O
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B. Financial Methodologies

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O

Submission Type Official

Approval Date N/A

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C. Income Standard Used

The amount of the income standard for this group is 100% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment of co-insurance and deductibles for Medicare Parts A, B and C and payment for the premiums for Medicare Parts A and B.

Medical assistance begins the first day of the month following the month in which the individual is determined to qualify for this eligibility group.

Qualified Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O

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F. Additional Information (optional)

SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Individuals with income above 100% and below 120% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

Package Header

 Package ID
 RI2023MS0003O
 SPA ID
 RI-23-0006

Submission TypeOfficialInitial Submission DateN/AApproval DateN/AEffective Date4/1/2023

Superseded SPA ID RI-93-005 User-Entered

The state covers the mandatory specified low income Medicare beneficiaries group in accordance with the following provisions:

A. Characteristics

$Individuals\ qualifying\ under\ this\ eligibility\ group\ must\ meet\ the\ following\ criteria:$

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Have income below the income standard and resources at or below the resource standard for this group.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O
Submission Type Official
Approval Date N/A

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SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

B. Financial Methodologies

| 1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state |
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| 2. Less restrictive methodologies are used in calculating countable income. |
| ○ Yes |
| ⊙ No |
| 3. Less restrictive methodologies are used in calculating countable resources. |
| ○ Yes |
| ⊙ No |
| |

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O

Submission Type Official

Approval Date N/A

Superseded SPA ID RI-93-005

User-Entered

SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

C. Income Standard Used

Family income must be above 100% FPL and below 120% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.

Specified Low Income Medicare Beneficiaries

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O

Submission Type Official

Approval Date N/A

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F. Additional Information (optional)

SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

Medicaid State Plan Eligibility

Eligibility Groups - Mandatory Coverage

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Individuals with income at or above 120% and below 135% of the FPL who are entitled to Medicare Part A, who qualify for payment of Medicare Part B premiums.

Package Header

 Package ID
 RI2023MS0003O
 SPA ID
 RI-23-0006

Submission TypeOfficialInitial Submission DateN/AApproval DateN/AEffective Date4/1/2023

Superseded SPA ID RI-93-005 User-Entered

The state covers the mandatory qualifying individuals group in accordance with the following provisions:

A. Characteristics

Individuals qualifying under this eligibility group must meet all of the following criteria:

- 1. Would qualify as Qualified Medicare Beneficiaries (described in section 1905(p)(1) of the Act), except that their income exceeds the income level for that eligibility group.
- 2. Are not otherwise eligible for Medicaid under the state plan.
- 3. Have income below the income standard and resources at or below the resource standard for this group.

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

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Approval Date N/A
Superseded SPA ID RI-93-005

User-Entered

SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

B. Financial Methodologies

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|--|
| 1. SSI methodologies are used in calculating household income. Please refer as necessary to Non-MAGI Methodologies, completed by the state |
| 2. Less restrictive methodologies are used in calculating countable income. |
| ○ Yes |
| ⊙ No |
| 3. Less restrictive methodologies are used in calculating countable resources. |
| ○ Yes |
| ⊙ No |
| |

Qualifying Individuals

MEDICAID | Medicaid State Plan | Eligibility | RI2023MS0003O | RI-23-0006

Package Header

Package ID RI2023MS0003O

Submission Type Official

Approval Date N/A

Superseded SPA ID RI-93-005

User-Entered

SPA ID RI-23-0006

Initial Submission Date N/A

Effective Date 4/1/2023

C. Income Standard Used

Family income must be at or above 120% FPL and below 135% FPL.

D. Resource Standard Used

The resource standard is the same used to determine eligibility for the Medicare Part D full-benefit low-income subsidy (LIS) (but without regard to the life insurance policy exclusion applied in LIS resource eligibility determinations). This standard is three times the SSI resource standard, adjusted annually in accordance with the consumer price index.

E. Medical Assistance Provided

Medical assistance is limited to payment for Medicare Part B premiums.