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ATTACHMENT 2.2-A PAGE 23g

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State/Territory Colorado

| Citation | Grou | ups Covered |
|--|-------------------|---|
| В | Optional Groups (| <u>Other_Than the Medically Needy</u> (Continued) |
| 1902(a)(10)(A) (ii)(XIX) of the Act | [X] 26 | Family Opportunity Act – Children who have not attained 19 years of age, who would be considered disabled under Section 1614(a)(3)(C) of the Act, and whose family income meets the standard described o Page 12p of Attachment 2.6-A. |
| | | _X Beginning with the effective date of its plan amendment, the State covers all children:eligible under this group, as described below |
| | | In the case of the second, third, and fourth quarters of fiscal year 2007, the State covers children who were born or or after January 1, 2001, or who were born on or after the following earlier dat |
| | | In the case of each quarter of fiscal year 2008, the State covers children who were born on or after October 1, 1995, or who were born on or after the following earlier date |
| , | | In the case of each quarter of fiscal year 2009 and each quarter of any fiscal year thereafter, the State covers children who were born after October 1 1989 |
| TN No 12-013 Supersedes TN No | Approval Date_// | 0/24//2 Effective Date 7/1/2012 |

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ATTACHMENT 2:6-A Page 12p

State/Territory: Colorado

| Citation | Condition or Requirement |
|------------------------------|---|
| 1902(a)(10)(A) | Income Standards |
| (ii)(XIX) of the Act (cont.) | XThe agency uses the family income standard of 300% of federal poverty level, |
| | The agency uses the family income standard of less than 300% of the federal poverty level. |
| | Specify the income standard |
| | The agency uses a family income standard higher than 300% of the federal poverty level, (no federal financial participation is provided for benefits to families above 300% FPL) |
| | Specify the income standard |
| | Resource Standards |
| | Under this provision agencies may not impose resource standards in determining eligibility |
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| TN No 12-013 Supersedes TN No. | Approval Date_ | 10/24/12 | Effective Date 7/1/2012 | |
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ATTACHMENT 2.6-A Page 12q

State/Territory: Colorado

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| Citation | Condition or Requirement |
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| 1902(a)(10)(A) (ii)(XIX) of the Act (cont.) | Income Methodologies |
| | In determining whether a family meets the income standard described above, the agency uses the following methodologies. |
| | The income methodologies of the SSI program |
| | The agency uses methodologies for treatment of income that are more restrictive than the SS program., These more restrictive methodologies are described in Supplement 4 to Attachment 2.6-A. |
| | X_The agency uses more liberal income methodologies than the SSI program. More liberal income methodologies are described in Supplement 8a to Attachment 2.6-A. |

| TN No. 12-013 Supersedes | Approval Data 10/24/12 | Effective Date 07/01/2012 |
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| TN No | | CMS ID |

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Revision.

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State/Territory Colorado

| Citation | Condition or Requirement |
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| 1902(cc) of the Act and 1903(a) | t Interaction with Employer Sponsored Family Coverage |
| | For individuals eligible under the FOA eligibility group described in No. 26 on page 23e of Attachment 2.2-A |
| | The agency requires parents to enroll in available group health plans through their employers if the plan qualifies under Section 2791(a) of the Public Health Service Act and the employer contributes at least 50 percent of the total cost of annual premiums for such coverage. |
| | If such coverage is obtained, the agency (subject to the payment of premiums described in Attachment 2.6-A, pages 12s and t) reduces any premium imposed by the State by an amount that reasonably reflects the premium contribution made by the parent for private coverage on behalf of a child with a disability; and treats such coverage as a third party liability. |
| | The agency provides for payment of all or some portion of the annual premium for the employer-provided private family coverage tha the parent is required to pay Any payments made by the State are considered, for purposes of section 1903(a), to be payments for medical assistance |
| | The agency pays percent of the premium |
| TN No. 12-013 Supersedes TN No | Approval Date 10/24/17 Effective Date 07/01/2012 |

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Revision.

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| State/Territory: Colorado | | |
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| Citation . | Condition or Requirement | |
| 1902(a)(10)(A)(ii)(XIX), 1916(i) and 1902(cc)(2)(A)(ii)(I) | Payment of Premiums | |
| of the Act | For individuals eligible under the FOA eligibility group described in No 26 on page 23e of Attachment 2.2-A. | |
| | The agency does not require the payment of premiums for Medicaid coverage | |
| | XThe agency requires payment of premiums on a sliding scale based on income The premiums, and how they are applied are described below. | |
| | NOTE. Amounts paid for premiums for Medicaid, required family coverage, and other cost- sharing may not exceed 5% of a family's income for families with income up to and including 200% FPL and 7 5% of a family's income for families above 200% and up to 300% FPL. | |

| TN No 12-013 Supersedes TN No. | Approval Date 10/24/17 Effective Date 07/01/2012 | |
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ATTACHMENT 2.6-A Page 12t

| State/Territory: Colorado | | |
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| Citation | Condition of Requirement | |
| | Payment of Premiums (Continued) NOTE: A State may not require prepayment of premiums and may not terminate eligibility of a child for medical:assistance on the basis of failure to pay a premium until the failure to pay continues for at least 60 days from the date on which the premium was past due NOTE. The State may waive payment of any such premium in any case where the State determines that requiring payment would te an undue hardship num: amounts are as follows: There is no monthly premium for households with income at or below 133% of FPL. A monthly premium of \$70 is applied to households with income above 185% of FPL but at or below 250% of FPL. A monthly premium of \$120 is applied to individuals with income above 250% of FPL but at or below 300% of FPL. | |
| TN No. 12-013 Supersedes Approval D TN No | ate_10/24/1.2 Effective Date 07/01/2012 | |

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Supplement 8a to ATTACHMENT 2.6-A Page 2a

The agency uses more liberal income methodologies than the SSI program in determining whether a family meets the income standard of 300% of FPL for the following groups.

X Family Opportunity Act - Children who have not attained 19 years of age, who would be considered disabled under Section 1614(a)(3)(C) of the Act, and whose family income meets the 300% of federal poverty level standard described on Page 12p of the Attachment 2:6-A.

Since the eligibility income limit is substantially higher than the SSI limit and the Department disregards 33% of household income, the income methodology described here is no more restrictive than the SSI disregards.

The Income Methodologies are as follows:

- The gross amount of earned and ünearned income is countable toward eligibility and premium payment, with the following exclusions:
 - a. Deduct the employment expense disregard of \$90; and
 - b. Deduct dependent care disregard.
 - c. The unearned income disregard described in this section shall be applied to the total amount received for each individual

i. The first \$50 per-household per month of any current monthly obligation shall be disregarded .Monthly support includes child support, and/or maintenance, and/or alimony. The disregard shall be divided among each person that receives the monthly support.

d. A disregard of 33% shall be taken from the family's net countable income.

*More liberal methods may not:result in exceeding gross income limitations under Section 1903 (f).

TN No 12-013 Supersedes TN No. Approval Date <u>10 1441</u>7 Effective Date 07/01/2012