## **Table of Contents**

State/Territory Name: North Dakota

State Plan Amendment (SPA) #: ND-14-0017

This file contains the following documents in the order listed:

1) Approval Letter

- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Approved SPA Pages

**TN:** ND-14-0017 **Approval Date:** 03/27/2015 **Effective Date** 10/01/2014

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 1600 Broadway, Suite 700 Denver, CO 80202-4967



## Region VIII

April 1, 2015

Maggie Anderson, Medicaid Director Medical Services Division North Dakota Department of Human Services 600 East Boulevard Avenue, Dept. 325 Bismarck, ND 58505-0250

RE: North Dakota #14-0017

Dear Ms. Anderson:

We have reviewed the proposed State Plan Amendment (SPA) submitted under transmittal number (TN) 14-0017. This amendment would allow the state to use MAGI-based income methodologies for determining medically needy eligibility for pregnant women, children, and caretaker relatives.

Please be informed that this State Plan Amendment was approved March 27, 2015 with an effective date of October 1, 2014. We are enclosing the CMS-179 and the amended plan page(s).

If you have any questions concerning this amendment, please contact Ann Clemens at (303) 844-2125.

Sincerely,

/s/

Mary Marchioni Acting Associate Regional Administrator Division for Medicaid and Children's Health Operations

CC: Maggie Anderson, ND Kathy Rodin, ND

TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE	
STATE PLAN MATERIAL	14-017		
		North Dakota	
FOR: HEALTH CARE FINANCING ADMINISTRATION	3. PROGRAM IDENTIFICATION:		
	TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)		
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE		
HEALTH CARE FINANCING ADMINISTRATION	O-4-b1 2014		
DEPARTMENT OF HEALTH AND HUMAN SERVICES	October 1, 2014		
5. TYPE OF PLAN MATERIAL (Check One):			
☐ NEW STATE PLAN ☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN ☐ AMENDME			
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		amendment)	
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:		
	a. FFY 2015 \$ negligible		
1903(f)(2) of the Act	b. FFY 2016 \$ negligible		
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	9. PAGE NUMBER OF THE SUPERS OR ATTACHMENT (If Applicable):		
Supplement 8a to Attachment 2.6A, Page 5	Supplement 8a to Attachment 2.6A, Page 5		
Attachment 2.6-A Page 14a	Attachment 2.6-A Page 14a		
10. SUBJECT OF AMENDMENT:			
Amends the State Plan to allow the state to use MAGI-	hased income methodologies	for determining	
medically needy eligibility for pregnant women and	~	tor determining	
11. GOVERNOR'S REVIEW (Check One):			
GOVERNOR'S OFFICE REPORTED NO COMMENT	OTHER, AS SPECIFIED:		
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	Maggie D. Anderson, Executive Director,		
☐ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL	<u>Department of Hur</u>	nan Services	
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:		
13. TYPED NAME:	Maggie D. Anderson, Executive Director		
Maggie D. Anderson	ND Department of Human Services 600 East Boulevard Avenue Dept 325		
14. TITLE:			
Executive Director, ND Dept. of Human Services	Bismarck ND 58505-0250		
15. DATE SUBMITTED:  December 30, 2014			
FOR REGIONAL OF			
17. DATERECENBO: December 30, 2012	E EXAMPLEMENTATION OF THE PARTY		
	March 27,		
PLAN APPROVED - ONE 19. EFFECTIVE DATE-OF APPROVED MATERIAL;	COPY ATTACHED  20. SIGNATURE OF REGIONAL OFF		
October 1, 2014			
21 TYPED NAME: Mary Marchieni			
23. REMARKS	Aeling ARA, DMC		
23. KIMARNO			

Revision: HCFA-PM-91-4 (BPD)

June 2009

Supplement 8a to ATTACHMENT 2.6-A

Page 5

State: North Dakota

OMB No.: 0938

## STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

## MORE LIBERAL METHODS OF TREATING INCOME UNDER SECTION 1902(r)(2) OF THE ACT\*

<u>X</u> Section 1902 (f) State Non-Section 1902 (f)	State
--	-------

- 18. The net income between the medically needy income level, described on page 8 of supplement 1 to Attachment 2.6-A, and 83% of the federal poverty level is disregarded for medically needy individuals under 1902(a)(10)(C) who are not described on Attachment 2.6-A, page 14a.
- 19. For the categories of individuals listed in Attachment 2.6-A, Page 14a, a disregard of five percent of the Modified Adjusted Gross Income is applied first when determining income for the medically needy category.
- 20. The net income between the medically needy income level, described on page 8 of supplement 1 to Attachment 2.6-A, and 90% of the federal poverty level is disregarded for medically needy under 1902(a)(10)(C) for the pregnant women group.
- 21. The net income between the medically needy income level, described on page 8 of supplement 1 to Attachment 2.6-A, and 92% of the federal poverty level is disregarded for medically needy under 1902(a)(10)(C) for the children's ages 0 through 17, and 18 through 20 year old groups.
- 22. The net income between the medically needy income level, described on page 8 of supplement 1 to Attachment 2.6-A, and 93% of the federal poverty level is disregarded for medically needy under 1902(a)(10)(C) for the parent/caretaker relative group.

TN No. <u>14-017</u> Supersedes TN No. <u>09-008</u>

Approval : <u>03/27/15</u>

Effective Date: October 1, 2014

HCFA ID: 7985E

Revision: HCFA-PM-91-8 (MB)

October 1991

Attachment 2.6-A Page 14a

State: North Dakota

Citation			Condition or Requirement
	a. <u>Medica</u>	lly Need	y (Continued)
1903(f)(2) of the Act		(3)	If countable income exceeds the MNIL standard, the agency deducts spenddown payments made to the State by the individual.

Subject to 42 CFR 435.602 and the provisions in Supplement 8a to Attachment 2.6-A of the State Plan, the State will use MAGI-based income methodologies for purposes of determining medically needy eligibility for the following categories of individuals:

- 1. Pregnant women
- 2. Children
- 3. Caretaker Relatives

TN No. <u>14-017</u> Supersedes

No. <u>92-010</u> Approval Date <u>03/27/15</u>

Effective Date <u>10-1-2014</u>