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State/Territory Name: NE

State Plan Amendment (SPA) #: 15-0010 MM1

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) Summary Form (with 179-like data)
- 3) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES
Centers for Medicare & Medicaid Services
601 East 12th Street, Suite 355
Kansas City, Missouri 64106



Division of Medicaid and Children's Health Operations

November 13, 2015

Calder Lynch, Director
Department of Health & Human Services
Division of Medicaid and Long Term Care
301 Centennial Mall S., 5th Floor
PO Box 95026
Lincoln, Nebraska 68509

Dear Mr. Lynch:

On October 23, 2015, the Centers for Medicare & Medicaid Services (CMS) received Nebraska's State Plan Amendment (SPA) transmittal #15-0010 of Section S14 which proposed to convert the July 16th, 1996, AFDC payment standard amount to a percentage of the federal poverty level (23%) for children in the reasonable classification group for qualified youth age 19 to 21 who entered into a subsidized guardianship or adoption at age 16 or older. This SPA replaces the S14 as approved in SPA 13-0027.

SPA 15-0010 was approved on November 10, 2015, as shown in MMDL with an effective date of November 1, 2015, as requested. Enclosed is a copy of the CMS-179 summary form, as well as the approved S14 for incorporation into the Nebraska State Plan.

If you have any questions regarding this amendment, please contact Barbara Cotterman at 816-426-5925.

Sincerely,

//s//

James G. Scott
Associate Regional Administrator
for Medicaid and Children's Health Operations

Enclosures

cc: Crystal Georgiana
Nancy Keller

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name: Nebraska

Transmittal Number:

Please enter the Transmittal Number (TN) in the format ST-YY-0000 where ST= the state abbreviation, YY = the last two digits of the submission year, and 0000 = a four digit number with leading zeros. The dashes must also be entered.

NE-15-0010

Proposed Effective Date

11/01/2015 (mm/dd/yyyy)

Federal Statute/Regulation Citation

Federal Budget Impact

	Federal Fiscal Year	Amount
First Year	2015	\$ 0.00
Second Year	2016	\$ 0.00

Subject of Amendment

S14 AFDC Income Standards

Governor's Office Review

- Governor's office reported no comment
- Comments of Governor's office received

Describe:

- No reply received within 45 days of submittal
- Other, as specified

Describe:

Signature of State Agency Official

Submitted By: Crystal Georgiana

Last Revision Date: Nov 4, 2015

Submit Date: Oct 23, 2015



Medicaid Eligibility

State Name:

OMB Control Number: 0938-1148

Transmittal Number: NE - 15 - 0010

Expiration date: 10/31/2014

AFDC Income Standards S14

Enter the AFDC Standards below. All states must enter:

MAGI-equivalent AFDC Payment Standard in Effect As of May 1, 1988 and
AFDC Payment Standard in Effect As of July 16, 1996

Entry of other standards is optional.

MAGI-equivalent AFDC Payment Standard in Effect As of May 1, 1988

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

Enter the statewide standard

	Household size	Standard (\$)	
+	1	221	X
+	2	295	X
+	3	369	X
+	4	443	X
+	5	517	X
+	6	590	X
+	7	664	X

Additional incremental amount

Yes No

Increment amount \$

The dollar amounts increase automatically each year

Yes No

AFDC Payment Standard in Effect As of July 16, 1996



Medicaid Eligibility

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

Enter the standard by some other way

	Name	Description	
	Use FPL	Nebraska uses 23% of the FPL for Non IV-E Subsidized Adoptions and Guardianships (Reasonable Classification Group) rather than dollar amounts by household size listed on page 2.	

	Household size	Standard (\$)	
+	1	222	X
+	2	293	X
+	3	364	X
+	4	435	X
+	5	506	X
+	6	577	X
+	7	648	X

Additional incremental amount
 Yes No

Increment amount \$

The dollar amounts increase automatically each year

- Yes
- No

MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard



Medicaid Eligibility

- Standard varies by region
 - Standard varies by living arrangement
 - Standard varies in some other way
- The dollar amounts increase automatically each year
- Yes No

AFDC Need Standard in Effect As of July 16, 1996

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

The dollar amounts increase automatically each year

- Yes No

AFDC Payment Standard in Effect As of July 16, 1996, increased by no more than the percentage increase in the Consumer Price Index for urban consumers (CPI-U) since such date.

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement
- Standard varies in some other way

The dollar amounts increase automatically each year

- Yes No

MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996, increased by no more than the percentage increase in the Consumer Price Index for urban consumers (CPI-U) since such date

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:



Medicaid Eligibility

- Statewide standard
 - Standard varies by region
 - Standard varies by living arrangement
 - Standard varies in some other way
- The dollar amounts increase automatically each year
- Yes No

TANF payment standard

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
 - Standard varies by region
 - Standard varies by living arrangement
 - Standard varies in some other way
- The dollar amounts increase automatically each year
- Yes No

MAGI-equivalent TANF payment standard

Income Standard Entry - Dollar Amount - Automatic Increase Option S13a

The standard is as follows:

- Statewide standard
 - Standard varies by region
 - Standard varies by living arrangement
 - Standard varies in some other way
- The dollar amounts increase automatically each year
- Yes No

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.