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State Name: Virginia

State Plan Amendment (SPA) #: 13-0014-MM6

This file contains the following documents in the order listed:

- 1) Approval Letter
- 2) CMS 179 Form/Summary Form (with 179-like data)
- 3) Superseding Pages Notice
- 4) Approved SPA Pages

DEPARTMENT OF HEALTH & HUMAN SERVICES Centers for Medicare & Medicaid Services 150 S. Independence Mall West Suite 216, The Public Ledger Building Philadelphia, Pennsylvania 19106-3499



Region III/Division of Medicaid and Children's Health Operations

SWIFT #102220134048

DEC 19 2013

Cynthia B. Jones, Director Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, VA 23219

Dear Ms. Jones:

The Centers for Medicare & Medicaid Services (CMS) has completed its review of Virginia's State Plan Amendment (SPA) 13-0014-MM6. SPA13-0014-MM6 identifies the non-financial eligibility requirements for both citizens and eligible non-citizens and incorporates them into Virginia's State Plan in accordance with the Social Security Act and regulations at Title 42, Part 435 of the Code of Federal Regulations. The effective date of this SPA is January 1, 2014.

Enclosed is a copy of the CMS Summary Page (CMS-179 form), the approved State Plan pages for S89; and the Superseding Pages of State Plan Material, which should also be incorporated into a separate section in the front of Virginia's State Plan.

We appreciate the cooperation and effort provided by your staff throughout this process. If you have further questions about this SPA, please contact Margaret Kosherzenko of my staff at 215-861-4288 or by email at Margaret.Kosherzenko@cms.hhs.gov.

Sincerely,

Francis McCyllough
Associate Regional Administrator

Enclosures

Medicaid State Plan Eligibility: Summary Page (CMS 179)

State/Territory name:

Virginia

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.

VA-13-0014

Proposed Effective Date

01/01/2014

(mm/dd/yyyy)

Federal Statute/Regulation Citation

Section 1902(e)(14) of the Social Security Act

Federal Budget Impact

Federal Fiscal Year

Amount

First Year 2014

\$ 0.00

Second Year 2015

\$ 0.00

Subject of Amendment

S89 - Conditions for citizenship and non-citizen eligibility

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:

Secretary of Health and Human Resources

Signature of State Agency Official

Submitted By:

Brian McCormick

Last Revision Date:

Dec 12, 2013

Submit Date:

Oct 6, 2013

SUPERSEDING STATE PLAN	
TRANSMITTAL NUMBER:	STATE:
13-0014 MM	Virginia
PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):
S89 Non-Financial Eligibility- Citizenship and Non-citizen Eligibility	Attachment 2.6-A: Page 2, Item 3, subparagraphs (a), (b), and (c), TN 09-09, Attachment 2.6-A: Pages 2.1 and 3, Item 3 subparagraphs (d), (e), (f), and (g), TN 12-09



Medicaid Eligibility

OMB Control Number 0938-1148 OMB Expiration date: 10/31/2014

Non-Financial Eligibility Citizenship and Non-Citizen Eligibility	S89
902(a)(46)(B) U.S.C. 1611, 1612, 1613, and 1641 903(v)(2),(3) and (4) 2 CFR 435.4 2 CFR 435.406 2 CFR 435.956	
Citizenship and Non-Citizen Eligibility	
The state provides Medicaid to citizens and nationals of the United States and certain non-citizens consistent with required CFR 435.406, including during a reasonable opportunity period pending verification of their citizenship, national status satisfactory immigration status.	
■ The state provides Medicaid eligibility to otherwise eligible individuals:	
■ Who are citizens or nationals of the United States; and	
Who are qualified non-citizens as defined in section 431 of the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA) (8 U.S.C. §1641), or whose eligibility is required by section 402(b) of PRWOR §1612(b)) and is not prohibited by section 403 of PRWORA (8 U.S.C. §1613); and	RA (8 U.S.C.
Who have declared themselves to be citizens or nationals of the United States, or an individual having satisfactor immigration status, during a reasonable opportunity period pending verification of their citizenship, nationality satisfactory immigration status consistent with requirements of 1903(x), 1137(d), 1902(ee) of the SSA and 42 C and 956.	OF
The reasonable opportunity period begins on and extends 90 days from the date the notice of reasonable opportunity begins on and extends 90 days from the date the notice of reasonable opportunity period begins on and extends 90 days from the date the notice of reasonable opportunity.	tunity is
The agency provides for an extension of the reasonable opportunity period if the individual is making a good f resolve any inconsistencies or obtain any necessary documentation, or the agency needs more time to complete verification process.	
The agency begins to furnish benefits to otherwise eligible individuals during the reasonable opportunity perio earlier than the date the notice is received by the individual.	d on a date
The date benefits are furnished is:	
• The date of application containing the declaration of citizenship or immigration status.	
C The date the reasonable opportunity notice is sent.	
C Other date, as described:	

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Effective Date: 01/01/2014



Medicaid Eligibility

The state provides Medicaid coverage to all Qualified Non-Citizens whose eligibility is not prohibited by section 403 of PRWORA (8 U.S.C. §1613).
C Yes © No
Indicate which requirements apply:
The state requires Lawful Permanent Residents to have 40 qualifying work quarters under Title II of the Social Security Act.
• Yes C No
The state limits eligibility to 7 years for certain non-citizens.
• Yes (No
Check all that apply:
Non-citizens admitted to the U.S. as a refugee under section 207 of the INA
Non-citizens granted asylum under section 208 of the INA
Non-citizens whose deportation is withheld under section 243(h) or 241(b)(3) of the INA
Non-citizens granted status as a Cuban-Haitian Entrant, as defined in section 501(e) of the Refugee Education Assistance Act of 1980
Non-citizens admitted to the U.S. as Amerasian
The state elects the option to provide Medicaid coverage to otherwise eligible individuals under 21 and pregnant women, lawfully residing in the United States, as provided in section 1903(v)(4) of the Act.
Pregnant women
☐ Individuals under age 21:
← Individuals under age 21
C Individuals under age 20
♠ Individuals under age 19
An individual is considered to be lawfully residing in the United States if he or she is lawfully present and otherwise meets the eligibility requirements in the state plan.
An individual is considered to be lawfully present in the United States if he or she:
1. Is a qualified non-citizen as defined in 8 U.S.C. 1641(b) and (c):
2. Is a non-citizen in a valid nonimmigrant status, as defined in 8 U.S.C. 1101(a)(15) or otherwise under the immigration laws (as defined in 8 U.S.C. 1101(a)(17));
3. Is a non-citizen who has been paroled into the United States in accordance with 8 U.S.C. 1182(d)(5) for less than 1 year, except for an individual paroled for prosecution, for deferred inspection or pending removal proceedings;
4. Is a non-citizen who belongs to one of the following classes:

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Medicaid Eligibility

	■ Granted temporary resident status in accordance with 8 U.S.C. 1160 or 1255a, respectively;
	Granted Temporary Protected Status (TPS) in accordance with 8 U.S.C. §1254a, and individuals with pending applications for TPS who have been granted employment authorization;
	■ Granted employment authorization under 8 CFR 274a.12(c):
	Family Unity beneficiaries in accordance with section 301 of Pub. L. 101-649, as amended:
	■ Under Deferred Enforced Departure (DED) in accordance with a decision made by the President:
	■ Granted Deferred Action status;
	■ Granted an administrative stay of removal under 8 CFR 241;
	Beneficiary of approved visa petition who has a pending application for adjustment of status;
	5. Is an individual with a pending application for asylum under 8 U.S.C. 1158, or for withholding of removal under 8 U.S.C.1231, or under the Convention Against Torture who -
	■ Has been granted employment authorization; or
	■ Is under the age of 14 and has had an application pending for at least 180 days:
	6. Has been granted withholding of removal under the Convention Against Torture;
	7. Is a child who has a pending application for Special Immigrant Juvenile status as described in 8 U.S.C. 1101(a)(27)(J);
	8. Is lawfully present in American Samoa under the immigration laws of American Samoa; or
	9. Is a victim of severe trafficking in persons, in accordance with the Victims of Trafficking and Violence Protection Act of 2000, Pub. L. 106-386, as amended (22 U.S.C. 7105(b)):
	10. Exception: An individual with deferred action under the Department of Homeland Security's deferred action for the childhood arrivals process, as described in the Secretary of Homeland Security's June 15, 2012 memorandum, shall not be considered to be lawfully present with respect to any of the above categories in paragraphs (1) through (9) of this definition.
	Other
<u>/</u>	The state assures that it provides limited Medicaid services for treatment of an emergency medical condition, not related to an organ transplant procedure, as defined in 1903(v)(3) of the SSA and implemented at 42 CFR 440.255, to the following individuals who meet all Medicaid eligibility requirements, except documentation of citizenship or satisfactory immigration status and/or present an SSN:
	Qualified non-citizens subject to the 5 year waiting period described in 8 U.S.C. 1613:
	Non-qualified non-citizens, unless covered as a lawfully residing child or pregnant woman by the state under the option in accordance with 1903(v)(4) and implemented at 435.406(b).

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.

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