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## **Table of Contents**

**State/Territory Name: United States Virgin Islands**

**State Plan Amendment (SPA) #: 13-011**

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
- 4) Superseding Document

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
Jacob K. Javits Federal Building  
26 Federal Plaza  
Room 37-100  
New York, New York 10278-0063



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December 24, 2014

Lennox Zamore, Director of Family Assistance Program  
Bureau of Health Insurance and Medical Assistance  
Department of Human Services  
1303 Hospital Ground  
Knud Hansen Complex  
Charlotte Amalie, St. Thomas, USVI 00802

Dear Mr. Zamore:

Enclosed is an approved copy of United States Virgin Islands State Plan Amendment 13-011, which was submitted to CMS on December 27, 2013. This SPA incorporates MAGI-Based Eligibility Groups – and AFDC Income Standards into the United States Virgin Islands' state plan in accordance with the Affordable Care Act.

Please be informed this SPA was approved on December 24, 2014 with an effective date of January 1, 2014.

We are enclosing the summary page (formerly CMS 179) and the amended plan pages (S14T, S25, S28T, S30T, S33, S52).

In addition, enclosed is a summary of state plan pages which are superseded by SPA 13-011.

Congratulations to you and your staff for your hard work and strong collaboration. If you have any questions, please contact Patricia Ryan at 212-616-2436 or [Patricia.Ryan@cms.hhs.gov](mailto:Patricia.Ryan@cms.hhs.gov).

Sincerely,

/s/

Michael Melendez  
Associate Regional Administrator  
Division of Medicaid and Children's Health

Enclosures

**Medicaid State Plan Eligibility: Summary Page (CMS 179)**

**State/Territory name:** Virgin Islands

**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.*

13-0011

**Proposed Effective Date**

01/01/2014 (mm/dd/yyyy)

**Federal Statute/Regulation Citation**

42 CFR 435.110; 435.116; 435.118; 435.150; 435.222

**Federal Budget Impact**

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

**Subject of Amendment**

MAGI Eligibility effective January 1, 2014  
VI Operating on CMS approved Section E Waiver

**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: Renée Joseph-Rhymer

Last Revision Date: Dec 23, 2014

Submit Date: Dec 22, 2014



# Medicaid Eligibility

State Name: U.S. Virgin Islands

Transmittal Number: - 13 - 0011

Form Standards - Territories

SMT

Indicate which type of poverty level the territory uses:

- The Federal Poverty Level (FPL)  
 The Local Poverty Level (LPL)

Enter the amount of the Local Poverty Level.

	Household Size	Amount	
+	1	\$367.92	X
+	2	\$437.59	X
+	3	\$507.52	X
+	4	\$577.44	X
+	5	\$648.87	X
+	6	\$718.80	X
+	7	\$788.72	X
+	8	\$858.65	X
+	9	\$928.57	X
+	10	\$998.50	X
+	11	\$1,068.42	X
+	12	\$1,138.35	X
+	13	\$1,208.27	X
+	14	\$1,278.20	X
+	15	\$1,348.12	X

Indicate whether the amounts entered above are monthly or yearly:

- Monthly  
 Yearly

Wherever FPL is referenced in the other sections of the state plan, it means the Local Poverty Level.



# Medicaid Eligibility

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 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	117	X
+	2	177	X
+	3	237	X
+	4	297	X
+	5	357	X
+	6	417	X
+	7	478	X
+	8	537	X
+	9	597	X
+	10	658	X
+	11	706	X
+	12	753	X
+	13	801	X



# Medicaid Eligibility

+	14	849	X
+	15	897	X

Additional incremental amount

Yes    No

Increment amount \$

The dollar amounts increase automatically each year

Yes    No

## Income Standard Entry - Dollar Amount - Standard Amount Option

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	100	X
+	2	154	X
+	3	209	X
+	4	263	X
+	5	317	X
+	6	371	X
+	7	426	X
+	8	480	X
+	9	534	X
+	10	589	X



# Medicaid Eligibility

<input checked="" type="checkbox"/>	11	631	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	12	673	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	13	715	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	14	757	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	15	799	<input checked="" type="checkbox"/>

Additional incremental amount

Yes  No

Increment amount \$

The dollar amounts increase automatically each year

Yes  No

## 1851 GI-equivalent AFDC Payment Standard as of July 16, 1996

Income Standard Payment Type Amount Automatic Increase Option S15a

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

Income Standard Payment Type Amount Automatic Increase Option S15a

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



# Medicaid Eligibility

**Income Standard in Effect As of 01/01/2014. Dollar amounts of the standard are more than the percentage increase in the Consumer Price Index for all 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

**MAXimum equivalent AFDC Payment Standard in Effect As of 01/01/2014. Dollar amounts of the standard are more than the percentage increase in the Consumer Price Index for all 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

**Income 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





# Medicaid Eligibility

## WAGI-equivalent TANF payment standard

Income Standard Entry - Dollar Amount	Available for Business Region	STN
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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

V.20140415



# Medicaid Eligibility

State Name: U.S. Virgin Islands

OMB Control Number: 0938-1148

Transmittal Number: VI - 13 - 0011

Expiration date: 10/31/2014

## Medicaid Eligibility Coverage for Parents and Other Caretaker Relatives

42 CFR 435.110  
1902(a)(10)(A)(i)(I)  
1931(b) and (d)

- Parents and Other Caretaker Relatives** - Parents and other caretaker relatives of dependent children with household income at or below a standard established by the state.

The state attests that it operates this eligibility group in accordance with the following provisions:

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

- Are parents or other caretaker relatives (defined at 42 CFR 435.4), including pregnant women, of dependent children (defined at 42 CFR 435.4) under age 18. Spouses of parents and other caretaker relatives are also included.

The state elects the following options:

- This eligibility group includes individuals who are parents or other caretakers of children who are 18 years old, provided the children are full-time students in a secondary school or the equivalent level of vocational or technical training.

- Options relating to the definition of caretaker relative (select any that apply):

- Options relating to the definition of dependent child (select the one that applies):

- The state elects to eliminate the requirement that a dependent child must be deprived of parental support or care by reason of the death, physical or mental incapacity, or absence from the home or unemployment of at least one parent.

- The child must be deprived of parental support or care, but a less restrictive standard is used to measure unemployment of the parent (select the one that applies):

- Have household income at or below the standard established by the state.

- MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

- Income standard used for this group

- Minimum income standard

The minimum income standard used for this group is the state's AFDC payment standard in effect as of May 1, 1988, converted to MAGI-equivalent amounts by household size. The standard is described in S14 AFDC Income Standards.

- The state certifies that it has submitted and received approval for its converted May 1, 1988 AFDC payment standard.

An attachment is submitted.



# Medicaid Eligibility

- The state certifies that it has submitted and received approval for its converted income standard(s) for parents and other caretaker relatives to MAGI-equivalent standards and the determination of the maximum income standard to be used for parents and other caretaker relatives under this eligibility group.

An attachment is submitted.

The state's maximum income standard for this eligibility group is:

- The state's effective income level for section 1931 families under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for section 1931 families under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for any population of parents/caretaker relatives under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for any population of parents/caretaker relatives under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Enter the amount of the maximum income standard:

- A percentage of the federal poverty level:  %
- The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. The standard is described in S14 AFDC Income Standards.
- The state's 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, converted to a MAGI-equivalent standard. The standard is described in S14 AFDC Income Standards.
- The state's TANF payment standard, converted to a MAGI-equivalent standard. The standard is described in S14 AFDC Income Standards.
- Other dollar amount
- Income standard chosen:

Indicate the state's income standard used for this eligibility group:

- The minimum income standard
- The maximum income standard
- The state's 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. The standard is described in S14 AFDC Income Standards.
- Another income standard in-between the minimum and maximum standards allowed

- There is no resource test for this eligibility group.

Presumptive Eligibility

YN: 13-011

Approval Date: 12/24/2014

Effective Date: 01/01/2014



# Medicaid Eligibility

The state covers individuals under this group when determined presumptively eligible by a qualified entity. The state assures it also covers individuals under the Pregnant Women (42 CFR 435.116) and/or Infants and Children under Age 19 (42 CFR 435.118) eligibility groups when determined presumptively eligible.

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.

V.20140415



# Medicaid Eligibility

State Name: U.S. Virgin Islands

Transmittal Number: VI - 13 - 0011

**Eligibility Groups - Mandatory Coverage - Territories** S28T

42 CFR 435.116  
1902(a)(10)(A)(i)(III) and (IV)  
1902(a)(10)(A)(ii)(I), (IV) and (IX)  
1931(b) and (d)  
1920

**Pregnant Women - Territories**

Women who are pregnant or post-partum, with household income at or below a standard established by the state.

The state attests that it operates this eligibility group in accordance with the following provisions:

Individuals qualifying under this eligibility group must be pregnant or post-partum, as defined in 42 CFR 435.4.

Pregnant women in the last trimester of their pregnancy without dependent children are eligible for full benefits under this group in accordance with section 1931 of the Act, if they meet the income standard for state plan S25 - Parents and Other Caretaker Relatives.

Yes

MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

Income standard used for this group

Minimum income standard

The minimum income standard used for this group is the state's AFDC payment standard in effect as of May 1, 1988, converted to MAGI-equivalent amounts by household size. The standard is described in S14T Income Standards-Territories.

The state certifies that it has an approved MAGI conversion plan.

**An attachment is submitted.**

Income standard chosen

Indicate the state's income standard used for this eligibility group:

The minimum income standard

The state's highest effective income level for coverage of pregnant women under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified pregnant women), 1902(a)(10)(A)(i)(IV) (poverty level-related

pregnant women), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related pregnant women), 1902(a)(10)(A)(ii)(I) (pregnant women who meet AFDC financial eligibility criteria) and 1902(a)(10)(A)(ii)(IV) (institutionalized pregnant women) in effect under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent.



# Medicaid Eligibility

- The state's highest effective income level for coverage of pregnant women under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified pregnant women), 1902(a)(10)(A)(i)(IV) (poverty level-related pregnant women), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related pregnant women), 1902(a)(10)(A)(ii)(I) (pregnant women who meet AFDC financial eligibility criteria) and 1902(a)(10)(A)(ii)(IV) (institutionalized pregnant women) in effect under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent.
- The state's effective income level for any population of pregnant women under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent.
- The state's effective income level for any population of pregnant women under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent.
- Another income standard higher than the minimum standard allowed.

The amount of the income standard for this eligibility group is (if not the minimum):

- AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- AFDC Need Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- 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. The standard is described in S14T Income Standards-Territories.
- 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. The standard is described in S14T Income Standards-Territories.
- TANF payment standard. The standard is described in S14T Income Standards-Territories.
- MAGI-equivalent TANF payment standard. The standard is described in S14T Income Standards-Territories.
- Another income standard not already specified in S14T Income Standards-Territories.
  - A percentage of the poverty level:  %
  - A dollar amount by family size

The standard is as follows:

- Statewide standard
- Standard varies by region
- Standard varies by living arrangement



# Medicaid Eligibility

Standard varies in some other way

Enter the standard amount			
	Household size	Standard (\$)	
<input checked="" type="checkbox"/>	1	542	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	2	625	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	3	708	<input checked="" type="checkbox"/>

Additional incremental amount  
 Yes    No

Increment amount \$

The dollar amounts increase automatically each year

Yes    No

There is no resource test for this eligibility group.

Benefits for individuals in this eligibility group consist of the following:

All pregnant women eligible under this group receive full Medicaid coverage under this state plan.

Pregnant women whose income exceeds the income limit specified below for full coverage of pregnant women receive only pregnancy-related services.

Presumptive Eligibility

The state covers ambulatory prenatal care for individuals under this group when determined presumptively eligible by a qualified entity.

V.20140415



# Medicaid Eligibility

State Name: U.S. Virgin Islands

Transmittal Number: VI - 13 - 0011

**Eligibility Groups - Mandatory Coverage - 2014** **S30T**

42 CFR 435.118

1902(a)(10)(A)(i)(III), (IV), (VI) and (VII)

1902(a)(10)(A)(ii)(IV) and (IX)

1931(b) and (d)

1920A

**Infants and Children under Age 19 - Territories** - Infants and children under age 19 with household income at or below standards established by the state based on age group.

The state attests that it operates this eligibility group in accordance with the following provisions:

Children qualifying under this eligibility group must meet the following criteria:

Are under age 19

Have household income at or below the standard established by the state.

MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

Income standard used for infants under age one

Minimum income standard

The minimum income standard used for infants under age one is the state's AFDC payment standard in effect as of May 1, 1988, converted to MAGI-equivalent amounts by household size. The standard is described in S14T Income Standards-Territories.

The state certifies that it has an approved MAGI conversion plan.

**An attachment is submitted.**

Income standard chosen

The state's income standard used for infants under age one (which cannot be less than the highest effective income level for coverage of infants under age one in the state plan as of March 23, 2010) is:

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the minimum income standard.

The state's highest effective income level for coverage of infants under age one under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(IV) (poverty level-related infants), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related infants) and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's highest effective income level for coverage of infants under age one under sections 1931 (low-income

families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(IV) (poverty level-related infants), 1902(a)(10)(A)(ii)(IX) (optional poverty level-related infants) and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent.

TN: 13-011

Approval Date: 12/24/2014

Effective Date: 01/01/2014

Virgin Islands

S30T





# Medicaid Eligibility

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of infants under age one under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of infants under age one under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent.

Another income standard higher than the minimum standard allowed, provided it is higher than the highest effective income level for this age group under the state plan as of March 23, 2010.

The amount of the income standard for infants under age one is (if not the minimum):

AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

AFDC Need Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

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. The standard is described in S14T Income Standards-Territories.

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. The standard is described in S14T Income Standards-Territories.

TANF payment standard. The standard is described in S14T Income Standards-Territories.

MAGI-equivalent TANF payment standard. The standard is described in S14T Income Standards-Territories.

Another income standard not already specified in S14T Income Standards-Territories.

A percentage of the poverty level:  %

A dollar amount by family size

The standard is as follows:

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



# Medicaid Eligibility

	Household size	Standard (\$)	
<input checked="" type="checkbox"/>	1	542	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	2	625	<input checked="" type="checkbox"/>
<input checked="" type="checkbox"/>	3	708	<input checked="" type="checkbox"/>

Additional incremental amount

Yes  No

Increment amount \$

The dollar amounts increase automatically each year

Yes  No

Income standard for children age one through age five, inclusive

Minimum income standard

The minimum income standard used for children age one through five is the state's AFDC payment standard in effect as of May 1, 1988, converted to MAGI-equivalent amounts by household size. The standard is described in S14T Income Standards-Territories.

Income standard chosen

The state's income standard used for children age one through five (which cannot be less than the highest effective income level for coverage of children age one through five in the state plan as of March 23, 2010) is:

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the minimum income standard.

The state's highest effective income level for coverage of children age one through five under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(VI) (poverty level-related children age one through five), and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's highest effective income level for coverage of children age one through five under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(VI) (poverty level-related children age one through five), and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of children age one through five under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of children age one through five under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent.

Another income standard higher than the minimum standard allowed, provided it is higher than the highest effective income level for this age group under the state plan as of March 23, 2010.

The amount of the income standard for children age one through five is (if not the minimum):



# Medicaid Eligibility

- AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- AFDC Need Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.
- 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. The standard is described in S14T Income Standards-Territories.
- 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. The standard is described in S14T Income Standards-Territories.
- TANF payment standard. The standard is described in S14T Income Standards-Territories.
- MAGI-equivalent TANF payment standard. The standard is described in S14T Income Standards-Territories.
- Another income standard not already specified in S14T Income Standards-Territories.
  - A percentage of the poverty level:  %
  - A dollar amount by family size

Income Standard Entry - Eligibility Determination System				Site																		
The standard is as follows:																						
<input checked="" type="radio"/> Statewide standard <input type="radio"/> Standard varies by region <input type="radio"/> Standard varies by living arrangement <input type="radio"/> Standard varies in some other way																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 25%;">Household size</th> <th style="width: 25%;">Standard (\$)</th> <th style="width: 10%;"></th> <th style="width: 35%;"></th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">+</td> <td style="text-align: center;">1</td> <td style="text-align: center;">542</td> <td style="text-align: center;">X</td> <td rowspan="3" style="padding: 5px;">           Additional incremental amount  <input checked="" type="radio"/> Yes   <input type="radio"/> No             Increment amount \$ <input style="width: 50px;" type="text" value="83"/> </td> </tr> <tr> <td style="text-align: center;">+</td> <td style="text-align: center;">2</td> <td style="text-align: center;">625</td> <td style="text-align: center;">X</td> </tr> <tr> <td style="text-align: center;">+</td> <td style="text-align: center;">3</td> <td style="text-align: center;">708</td> <td style="text-align: center;">X</td> </tr> </tbody> </table>						Household size	Standard (\$)			+	1	542	X	Additional incremental amount <input checked="" type="radio"/> Yes <input type="radio"/> No  Increment amount \$ <input style="width: 50px;" type="text" value="83"/>	+	2	625	X	+	3	708	X
	Household size	Standard (\$)																				
+	1	542	X	Additional incremental amount <input checked="" type="radio"/> Yes <input type="radio"/> No  Increment amount \$ <input style="width: 50px;" type="text" value="83"/>																		
+	2	625	X																			
+	3	708	X																			



# Medicaid Eligibility

The dollar amounts increase automatically each year

Yes  No

Income standard for children age six through age eighteen, inclusive

Minimum income standard

The minimum income standard used for children age six through eighteen is the state's AFDC payment standard in effect as of May 1, 1988, converted to MAGI-equivalent amounts by household size. The standard is described in S14T Income Standards-Territories.

Income standard chosen

The state's income standard used for children age six through eighteen (which cannot be less than the highest effective income level for coverage of children age six through eighteen in the state plan as of March 23, 2010) is:

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the minimum income standard.

The state's highest effective income level for coverage of children age six through eighteen under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(VII) (poverty level-related children age six through eighteen) and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's highest effective income level for coverage of children age six through eighteen under sections 1931 (low-income families), 1902(a)(10)(A)(i)(III) (qualified children), 1902(a)(10)(A)(i)(VII) (poverty level-related children age six through eighteen) and 1902(a)(10)(A)(ii)(IV) (institutionalized children), in effect under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of children age six through eighteen under a Medicaid 1115 demonstration as of March 23, 2010, converted to a MAGI-equivalent.

If higher than the highest effective income level for this age group under the state plan as of March 23, 2010, the state's effective income level for any population of children age six through eighteen under a Medicaid 1115 demonstration as of December 31, 2013, converted to a MAGI-equivalent.

Another income standard higher than the minimum standard allowed, provided it is higher than the highest effective income level for this age group under the state plan as of March 23, 2010.

The amount of the income standard for children age six through eighteen is (if not the minimum):

AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

MAGI-equivalent AFDC Payment Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

AFDC Need Standard in Effect As of July 16, 1996. The standard is described in S14T Income Standards-Territories.

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. The standard is described in S14T Income Standards-Territories.



# Medicaid Eligibility

- 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. The standard is described in S14T Income Standards-Territories.
- TANF payment standard. The standard is described in S14T Income Standards-Territories.
- MAGI-equivalent TANF payment standard. The standard is described in S14T Income Standards-Territories.
- Another income standard not already specified in S14T Income Standards-Territories.
  - A percentage of the poverty level:  %
  - A dollar amount by family size

**Income Standard Entry - Dollar Amount - Automatic Incremental Option** S33a

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	542	X
+	2	625	X
+	3	708	X

Additional incremental amount

- Yes  No

Increment amount \$

The dollar amounts increase automatically each year

- Yes  No

There is no resource test for this eligibility group.

Presumptive Eligibility

The state covers children when determined presumptively eligible by a qualified entity.

V.20140415



# Medicaid Eligibility

State Name: U.S. Virgin Islands

OMB Control Number: 0938-1148

Transmittal Number: VI - 13 - 0011

Expiration date: 10/31/2014



42 CFR 435.150  
1902(a)(10)(A)(i)(IX)

**Former Foster Care Children** - Individuals under the age of 26, not otherwise mandatorily eligible, who were on Medicaid and in foster care when they turned age 18 or aged out of foster care.

The state attests that it operates this eligibility group under the following provisions:

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

Are under age 26.

Are not otherwise eligible for and enrolled for mandatory coverage under the state plan, except that eligibility under this group takes precedence over eligibility under the Adult Group.

Were in foster care under the responsibility of the state or Tribe and were enrolled in Medicaid under the state's state plan or 1115 demonstration when they turned 18 or at the time of aging out of that state's or Tribe's foster care program.

The state elects to cover children who were in foster care and on Medicaid in any state at the time they turned 18 or aged out of the foster care system.

Yes     No

The state covers individuals under this group when determined presumptively eligible by a qualified entity. The state assures it also covers individuals under the Pregnant Women (42 CFR 435.116) and/or Infants and Children under Age 19 (42 CFR 435.118) eligibility groups when determined presumptively eligible.

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.

V.20140415



# Medicaid Eligibility

State Name: U.S. Virgin Islands

OMB Control Number: 0938-1148

Transmittal Number: VI - 13 - 0011

Expiration date: 10/31/2014

## Eligibility Groups - Options for Coverage Reasonable Classification of Individuals under Age 21

42 CFR 435.222  
1902(a)(10)(A)(ii)(I)  
1902(a)(10)(A)(ii)(IV)

**Reasonable Classification of Individuals under Age 21** - The state elects to cover one or more reasonable classifications of individuals under age 21 who are not mandatorily eligible and who have income at or below a standard established by the state and in accordance with provisions described at 42 CFR 435.222.

Yes  No

The state attests that it operates this eligibility group in accordance with the following provisions:

- Individuals qualifying under this eligibility group must qualify under a reasonable classification by meeting the following criteria:
  - Be under age 21, or a lower age, as defined within the reasonable classification.
  - Have household income at or below the standard established by the state, if the state has an income standard for the reasonable classification.
  - Not be eligible and enrolled for mandatory coverage under the state plan.
- MAGI-based income methodologies are used in calculating household income. Please refer as necessary to S10 MAGI-Based Income Methodologies, completed by the state.

The state covered at least one reasonable classification under this eligibility group under its Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013, with income standards higher (including disregarding all income) than the current mandatory income standards for the individual's age.

Yes  No

The state also covered at least one reasonable classification under this group in the Medicaid state plan as of March 23, 2010 with income standards higher (including disregarding all income) than the current mandatory income standards for the individual's age.

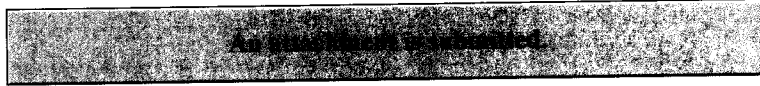
Yes  No



# Medicaid Eligibility

## Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010

- The state attaches the approved pages from the Medicaid state plan as of March 23, 2010 to indicate the age groups, reasonable classifications, and income standards used at that time for this eligibility group.



## Current Coverage of All Children under a Specified Age

The state covers all children under a specified age limit, equal to or higher than the age limit and/or income standard used in the Medicaid state plan as of March 23, 2010, provided the income standard is higher than the current mandatory income standard for the individual's age. The age limit and/or income standard used must be no higher than any age limit and/or income standard covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income.

- Yes    No

Indicate below the age under which all children are covered under this eligibility group, based on a specific age group used previously in the Medicaid state plan or under a Demonstration, which is equal to or higher than the age group for coverage of all children in the Medicaid state plan as of March 23, 2010.

- Under age 21    Under age 20    Under age 19    Under age 18

Enter the income standard used for this age group. The standard must be higher than the mandatory income standard for the individual's age, not more restrictive than that used in the Medicaid state plan as of March 23, 2010 and not less restrictive than that used in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

### Income standard used

#### Minimum income standard

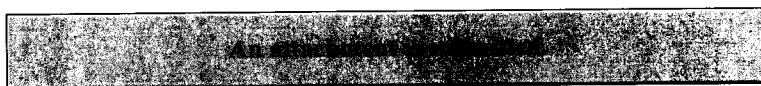
The minimum income standard for this classification of children is the AFDC payment standard in effect as of July 16, 1996, not converted to MAGI-equivalent. This standard is described in S14 AFDC Income Standards.

#### Maximum income standard

No income test was used (all income was disregarded) for this classification either in the Medicaid state plan as of December 31, 2013, or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013.

- Yes    No

- The state certifies that it has submitted and received approval for its converted income standards for this classification of children to MAGI-equivalent standards and the determination of the maximum income standard to be used for this classification of children under this eligibility group.







# Medicaid Eligibility

The state's maximum income standard for this classification of children (which must exceed the minimum for the classification) is:

- The state's effective income level for this classification of children under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.
- The state's effective income level for this classification of children under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Enter the amount of the maximum income standard:

- A percentage of the federal poverty level:  %
- The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.
- The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.
- Other dollar amount

**Income standard chosen**

Individuals qualify under this classification under the following income standard:

- The minimum standard
- The maximum income standard

If not chosen as the maximum income standard, the state's effective income level for this classification under the Medicaid state plan as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under the Medicaid state plan as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.



# Medicaid Eligibility

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of March 23, 2010, converted to a MAGI-equivalent percent of FPL or amounts by household size.

If not chosen as the maximum income standard, and if higher than the effective income level used under the Medicaid state plan as of March 23, 2010, the state's effective income level for this classification under a Medicaid 1115 Demonstration as of December 31, 2013, converted to a MAGI-equivalent percent of FPL or amounts by household size.

Another income standard in-between the minimum and maximum standards allowed, provided it is higher than the effective income level for this classification in the state plan as of March 23, 2010, converted to a MAGI equivalent.

The income standard used for this classification is:

A percentage of the federal poverty level:  %

The state's TANF payment standard, not converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

The state's AFDC payment standard in effect as of July 16, 1996, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

The state's TANF payment standard, converted to a MAGI-equivalent standard. This standard is described in S14 AFDC Income Standards. This option should only be selected for children 19 and older, and only if the state has not elected to cover the Adult Group.

Other dollar amount

The standard is as follows:

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

	Household size	Standard (\$)	
<input checked="" type="checkbox"/>	1	542	
<input checked="" type="checkbox"/>	2	625	
<input checked="" type="checkbox"/>	3	708	

Additional incremental amount

Yes  No

Increment amount \$



# Medicaid Eligibility

The dollar amounts increase automatically each year

Yes  No

## Current Coverage of Reasonable Classifications Covered in the Medicaid State Plan as of March 23, 2010

The state covers reasonable classifications of children previously covered in the Medicaid state plan as of March 23, 2010, with income standards higher than the current mandatory income standard for the age group. Age limits and income standards are equal to or higher than the Medicaid state plan as of March 23, 2010, but no higher than any age limit and/or income standard for this classification covered in the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013. Higher income standards may include the disregard of all income.

Yes  No

## Other Reasonable Classifications Previously Covered

The state covers reasonable classifications of children not covered in the Medicaid state plan as of March 23, 2010, but covered under the Medicaid state plan as of December 31, 2013 or under a Medicaid 1115 Demonstration as of March 23, 2010 or December 31, 2013 with an income standard higher than the current mandatory income standard for the age group.

Yes  No

## Additional new age groups or reasonable classifications covered

If the state has not elected to cover the Adult Group (42 CFR 435.119), it may elect to cover additional new age groups or reasonable classifications that have not been covered previously. If the state covers the Adult Group, this additional option is not available, as the standard for the new age groups or classifications is lower than that used for mandatory coverage.

The state does not cover the Adult Group and elects the option to include in this eligibility group additional age groups or reasonable classifications that have not been covered previously in the state plan or under a Medicaid 1115 Demonstration. Any additional age groups or reasonable classifications not previously covered are restricted to the AFDC income standard from July 16, 1996, not converted to a MAGI-equivalent standard.

Yes  No

There is no resource test for this eligibility group.

## PRA Disclosure Statement

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**SUPERSEDING PAGES OF  
STATE PLAN MATERIAL**

**TRANSMITTAL NUMBER:**

13-011-MM1

**STATE:**

U.S. Virgin Islands

Pages or sections of pages being superseded by S14T, S25, S28T, S30T, and S52 and related pages or sections of pages being deleted as obsolete

State Plan Section	Complete Pages Removed	Partial Pages Removed
Attachment 2.2-A	Page 2 Page 4a Page 5 Page 13 Page 14 Page 15 Page 17 Page 23b Page 23c	Page 1 for AFDC-related groups Page 3, A.3 for AFDC-related groups Page 3, A.4 Page 4, A.4.c and f Page 7, B.1 and B.2 for AFDC-related groups Page 8 for AFDC-related groups Page 12, B.8 Page 16, B.10 and B.12 Page 18, B.15 Page 20, C.4 Page 23d, B.21
Attachment 2.6-A	Page 11 Page 13 Page 13a Page 13b	Page 1 for AFDC-related groups Page 5, A.8 and A.9 Page 8, C.1.b(i) Page 12, C.2.c(2) Page 13c, C.2.e(2) Page 18, C.6.b Page 19, C.6.c Page 23, C.11.a(iii)
Supplement 1 to Attachment 2.6-A	Pages 2 and 3	Page 1a (TN 13-010)

Supplement 3 to Attachment 2.6-A	Pages 1-2	Page 3, #3 Page 3a, #4
Supplement 5 to Attachment 2.6-A	Page 1	Page 1a for children (TN No. 13-010)
Supplement 6 to Attachment 2.6-A	Page 1	
Supplement 12 to Attachment 2.6-A	Page 1 (from TN 13-010)	
Supplement 14 to Attachment 2.6-A	Page 1	