

Secretary of State
NOTICE OF PROPOSED RULEMAKING HEARING
A Statement of Need and Fiscal Impact accompanies this form.

Oregon Health Authority (OHA), Division of Medical Assistance Programs (Division)	410
Agency and Division	Administrative Rules Chapter Number
Sandy Cafourek	(503) 945-6430
Rules Coordinator	Telephone

500 Summer St NE, Salem, OR 97301

RULE CAPTION

Specific Requirements; Extended Medical Assistance

Not more than 15 words that reasonably identify the subject matter of the agency's intended action.

September 15, 2015	10:30 a.m.	500 Summer St. NE, Salem, OR 97301 Room 160	Sandy Cafourek
Hearing Date	Time	Location	Hearings Officer

Auxillary aids for persons with disabilities are available upon advance request.

RULEMAKING ACTION

Secure approval of new rule numbers (Adopted or Renumbered rules) with the Administrative Rules Unit prior to filing.

ADOPT:

AMEND: OAR 410-200-0440

REPEAL: OAR 410-200-0440(T)

RENUMBER:

AMEND & RENUMBER:

Stat. Auth. : ORS 411.402, 411.404, 413.042, 414.534

Other Auth.: 42 CFR: 435.110, 435.112, 435.115, 435.116, 435.118, 435.403, 435.940, 435.1200, 457.80, 457.340, 458.350, 435.3, 435.4, 435.406, 435.407, 435.940, 435.952, 435.956, 435.1008, 457.320, 457.380, 435.940, 435.956, 435.406, 457.380, 435.117, 435.170, 435.190, 435.916, 435.917, 435.926, 435.952, 435.1200, 435.1205, 447.56, 457.340, 457.350, 457.360, 457.805, 433.145, 433.147, 433.148, 433.146, 435.610, 435.115, 435.403, 435.1200, 457.80, 457.340, 458.350, 435.119, 435.222, 435.118, 433.138, 433.147, 433.148, 435.602 435.608

Stats. Implemented: ORS 411.060, 411.095, 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 411.447, 413.032, 413.038, 414.025, 414.231, 414.534, 414.536, 414.706

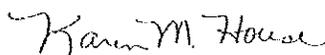
RULE SUMMARY

The Centers for Medicare and Medicaid Services (CMS) released guidance on 4/1/15 that section 1925 of the Social Security Act sunsetted on 03/31/15. Section 1925 of the Social Security Act allowed Oregon to provide 12 months of Transitional Medical Assistance (TMA – Oregon titled these benefits Extended Medical Assistance) for individuals who lose eligibility for Medicaid under section 1931 of the Social Security Act due to earnings. On 4/14/15, the Senate passed HR 2, which the president signed into law. HR 2, in part, maintains section 1925 of the Social Security Act permanently.

The agency requests public comment on whether other options should be considered for achieving the rule's substantive goals while reducing the negative economic impact of the rule on business.

September 17, 2015 by 5 p.m. Send written comments to: dmap.rules@state.or.us

Last Day for Public Comment (Last day to submit written comments to the Rules Coordinator)



August 7, 2015

Signature	Printed name	Karen M. House	Date
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Note: Hearing Notices must be submitted by the 15th day of the month to be published in the next month's *Oregon Bulletin*.

Secretary of State
STATEMENT OF NEED AND FISCAL IMPACT

A Notice of Proposed Rulemaking Hearing or a Notice of Proposed Rulemaking accompanies this form.

Oregon Health Authority (Authority), Division of Medical Assistance Programs (Division)

410

Agency and Division

Administrative Rules Chapter Number

Specific Requirements; Extended Medical Assistance

Rule Caption (Not more than 15 words that reasonably identifies the subject matter of the agency's intended action.)

In the Matter of: The amendment of OAR 410-200-0440 and the repeal of OAR 410-200-0440(T)

Statutory Authority: ORS 411.402, 411.404, 413.042, 414.534

Other Authority: 42 CFR: 435.110, 435.112, 435.115, 435.116, 435.118, 435.403, 435.940, 435.1200, 457.80, 457.340, 458.350, 435.3, 435.4, 435.406, 435.407, 435.940, 435.952, 435.956, 435.1008, 457.320, 457.380, 435.940, 435.956, 435.406, 457.380, 435.117, 435.170, 435.190, 435.916, 435.917, 435.926, 435.952, 435.1200, 435.1205, 447.56, 457.340, 457.350, 457.360, 457.805, 433.145, 433.147, 433.148, 433.146, 435.610, 435.115, 435.403, 435.1200, 457.80, 457.340, 458.350, 435.119, 435.222, 435.118, 433.138, 433.147, 433.148, 435.602 435.608

Stats. Implemented: ORS 411.060, 411.095, 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 411.447, 413.032, 413.038, 414.025, 414.231, 414.534, 414.536, 414.706

Need for the Rule(s): The Centers for Medicare and Medicaid Services (CMS) released guidance on 4/1/15 that section 1925 of the Social Security Act sunsetted on 03/31/15. Section 1925 of the Social Security Act allowed Oregon to provide 12 months of Transitional Medical Assistance (TMA – Oregon titled these benefits Extended Medical Assistance) for individuals who lose eligibility for Medicaid under section 1931 of the Social Security Act due to earnings. On 4/14/15, the Senate passed HR 2, which the president signed into law. HR 2, in part, maintains section 1925 of the Social Security Act permanently.

Documents Relied Upon, and where they are available:

CMCS Informational Bulletin dated 04/01/15. Bulletin can be found here: <http://www.medicaid.gov/Federal-Policy-Guidance/downloads/CIB-04-01-2015.pdf>

<http://energycommerce.house.gov/sites/repUBLICANS.energycommerce.house.gov/files/114/BILLS-114hr2ih.pdf>

Fiscal and Economic Impact: None. This rule amendment maintains current policy.

Statement of Cost of Compliance:

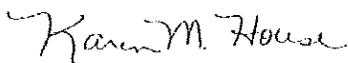
1. Impact on state agencies, units of local government and the public (ORS 183.335(2)(b)(E)): Amending these rules will have no fiscal impact on the Authority, other state agencies, units of local government, the public, or businesses, including small businesses. None.

2. Cost of compliance effect on small business (ORS 183.336):

- Estimate the number of small businesses and types of business and industries with small businesses subject to the rule: None.
- Projected reporting, recordkeeping and other administrative activities required for compliance, including costs of professional services: None.
- Equipment, supplies, labor and increased administration required for compliance: None.

How were small businesses involved in the development of this rule? N/A

Administrative Rule Advisory Committee consulted?: No. If not, why?: The original reason for the temporary rule was based on CMS guidance. Then CMS let us know that the change would not be happening. The content of the rule is now the same as it was before the temporary rule change, but the actual text formatting has changed for the sake of clarity.



August 7, 2015

Signature

Printed Name: Karen M. House

Date

Administrative Rules Unit, Archives Division, Secretary of State, 800 Summer Street NE, Salem, Oregon 97310.

410-200-0440

Specific Requirements; Extended Medical Assistance

(1) The following individuals may be eligible for Extended Medical Assistance (EXT) if they
~~Effective 04/01/15 individuals who lose eligibility for Medical Assistance Assumed (MAA),~~
Medical Assistance to Families (MAF), or MAGI Parent or Other Caretaker Relative (MAGI
PCR) benefits;

(a) Individuals who lose eligibility for MAA, MAF, or MAGI PCR due to an~~are eligible for four~~
~~months of Extended Medical Assistance (EXT) if all of the following requirements are met:~~

~~(a) Loss of eligibility is due to:~~

~~(A) The receipt or increase of earned income~~ are eligible for twelve (12) months of EXT if: or

~~(B) The receipt or increase of spousal support;~~

~~(b) Eligibility is redetermined and the individual is not eligible for any other Medicaid/CHIP~~
~~program;~~

(b) Individuals who lose eligibility for MAA, MAF, or MAGI PCR, due to the receipt or an
increase of spousal support, are eligible for four months of EXT benefits if: and

(A) e) Individuals were eligible for and receiving MAA, MAF, or MAGI PCR benefits for any
three of the six months preceding the receipt or increase in spousal support that resulted in loss
of eligibility; and;

(B) Eligibility is redetermined, and the individual is not eligible for any other Medicaid/CHIP
program. month in which eligibility was lost as described in section (a).

~~(2) To be eligible for EXT, the household group of individuals who lose eligibility for MAGI~~
~~PCR benefits must contain a dependent child who has minimum essential coverage.~~

~~(23) The EXT beneficiary must be a resident of Oregon.~~

(34) Individuals who lose EXT eligibility for one of the following reasons may regain EXT
eligibility for the remainder of the original eligibility period if the requirements outlined in
sections (12) and (23) are met:

(a) EXT eligibility is lost because the individual leaves the household during the EXT eligibility
period. The individual may regain EXT eligibility if they return to the household; or

(b) EXT eligibility is lost due to a change in circumstance that results in eligibility for another
OCCS medical program, and then -a subsequent change in circumstance occurs that results in
ineligibility for all OCCS medical programs, the individual may regain EXT eligibility.

(45) The effective date of EXT is the first of the month following the month in which MAA, MAF, or MAGI PCR program eligibility ends.

(56) If an individual receives MAA, MAF, or MAGI PCR benefits during months when they were eligible for EXT:

(a) Such months are not an overpayment;

(b) Any month in which an individual receives MAA, MAF, or MAGI PCR benefits when they were eligible for EXT is counted as a month of the EXT eligibility period.

(67) If a beneficiary of MAA, MAF, or MAGI PCR benefits experiences another change in conjunction with the receipt or increase of earned income or spousal support, and the other change, by itself, makes the ~~household-group~~ beneficiary ineligible for the current program, the beneficiary is not eligible for EXT.

Stat. Auth.: ORS 411.095, 411.402, 411.404, 413.038, 414.025

Stats. Implemented: ORS 411.095, 411.400, 411.402, 411.404, 411.406, 411.439, 411.443, 413.032, 413.038, 414.025, 414.231, 411.447, 414.706