Eligibility Determination Groups

9.4 PARENTS/CARETAKER RELATIVES GROUP

The Affordable Care Act (ACA) simplified eligibility categories by combining certain existing mandatory and optional eligibility groups. The Parents/Caretaker Relatives coverage group replaces the former Aid to Families with Dependent Children (AFDC) Medicaid coverage group for parents and other caretaker relatives.

The ACA established a new methodology based on IRS 36B tax rules for determining how income is counted and how household composition and size are determined when establishing financial eligibility, called Modified Adjust Gross Income (MAGI). AFDC methodologies used to determine financial eligibility for these individuals will be superseded by MAGI methodologies beginning January 1, 2014.

NOTE: West Virginia received an 1115 waiver to begin using MAGI methodologies to determine eligibility for populations subject to MAGI beginning with applications submitted on or after October 1, 2013, and for any retroactive coverage months requested on applications submitted on or after October 1, 2013.

To be eligible under this category, the parent or caretaker relative must be living in the household with a dependent child for whom they assume primary responsibility. See Section 15.2 for the definition of a dependent child and specified caretaker relative.

A. THE ASSISTANCE GROUP (AG)

Who Must Be Included

Medicaid is provided to parents and other caretaker relatives, and if living with such parent or other caretaker relative, his or her spouse.

2. Who Cannot Be Included

Only the parent or caretaker relative and his or her spouse are included.

B. THE MAGI HOUSEHOLD INCOME GROUP (IG) AND NEEDS GROUPS (NG)

The methodology for determining the Medicaid household's IG and NG is the same as found in Section 9.3,B and C.

DUE TO DELETION OF MANUAL MATERIAL

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