

9.3 ADULT GROUP

The Patient Protection and Affordable Care Act, enacted March 23, 2010, amended by the Health Care and Education Reconciliation Act of 2010, enacted March 30, 2010, are together referred to as the Affordable Care Act (ACA). The ACA established a new categorically mandatory coverage group known as the Adult Group. Effective January 1, 2014 Medicaid coverage will be provided to individuals age 19 or older and under age 65 who are not otherwise eligible for and enrolled in another categorically mandatory Medicaid coverage group, and are not entitled to or enrolled in Medicare Part A or B. Eligibility for this group will be determined using Modified Adjusted Gross Income (MAGI) methodologies established in Section 10.8.

A. THE ASSISTANCE GROUP (AG)

1. Who Must Be Included

- Adults age 19 or older and under age 65

2. Who Cannot Be Included

- Individuals eligible for other categorically mandatory coverage groups
 - SSI
 - Deemed SSI
 - Parents/Caretakers
 - Pregnant Women
 - Children Under Age 19
 - Former Foster Children
- Individuals entitled to or enrolled in Medicare Part A or B
- Parents or other caretaker relatives living with a dependent child under the age of 19, unless the child is also receiving benefits under Medicaid, CHIP, or other minimum essential coverage (MEC). See definition in Section 10.1.

NOTE: If a woman indicates at application or review that she is pregnant she is not eligible to be included in the Adult Group; she must be evaluated for the Pregnant Women coverage group.